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ABSTRACT

This policy paper includes four perspectives on educational quality presented at the 1983 annual meeting of the National Association for the Education of Young Children. Gwen Morgan considers the role of government, raising questions about what regulatory agencies should do, can do, and cannot do in the light of public attitudes. Ways that practitioners can provide high quality and developmentally appropriate services are the focus of Nancy Curry's presentation, while the process by which parents/consumers can be helped to better choose among the options provided is discussed by Richard Endsley and Marilyn Bradbard. Finally, suggestions for ways researchers can best contribute to the field's knowledge about the determinants of good quality early childhood experiences are presented by Hakim Rashid. In an introductory overview, the main points raised in each of the presentations are briefly summarized; the concluding section synthesizes ideas and recurring themes that can serve as useful guides to the reader. Included is a definition of quality espoused by the High/Scope Foundation which has three integral components: (1) a developmentally based curriculum, (2) staff training and supervision, and (3) ongoing evaluation. (DST)

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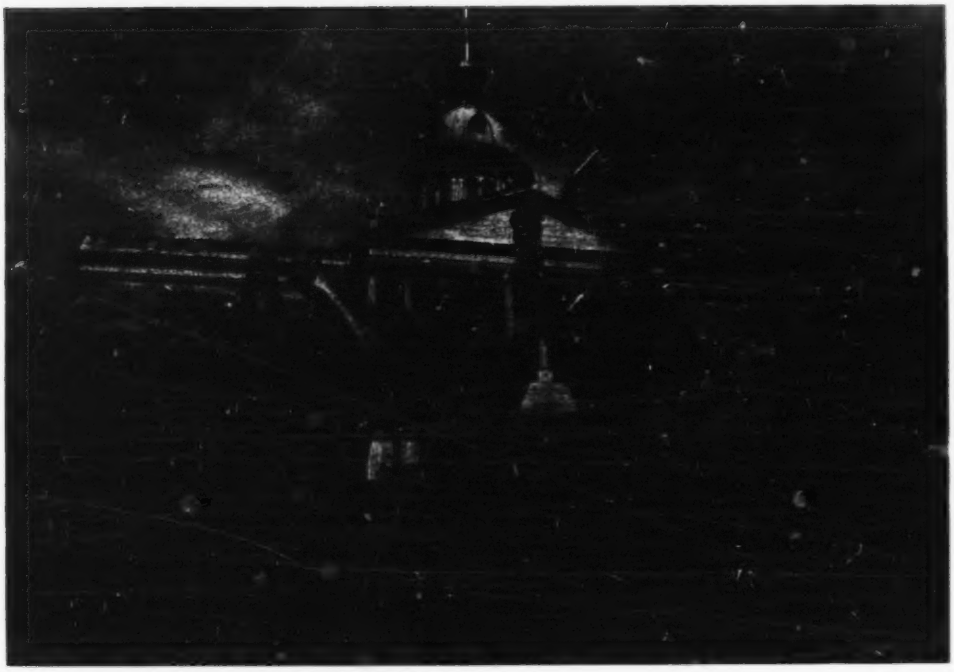
Quality in Early Childhood Programs:

FOUR PERSPECTIVES



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Lawrence J. Schweinhart and David P. Weikart, Series Editors

No. 3

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QUALITY IN EARLY CHILDHOOD PROGRAMS: FOUR PERSPECTIVES

OVERVIEW

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THE GOVERNMENT PERSPECTIVE ON QUALITY

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A DEVELOPMENTAL PERSPECTIVE ON PRACTICE

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THE PARENT-CONSUMER PERSPECTIVE ON QUALITY

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WHAT THE RESEARCH SAYS (AND DOESN'T SAY) ABOUT QUALITY

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The High/Scope Educational Research Foundation is an independent, non-profit center for research, development, and training in education and human development, with primary emphasis on preschool child development programs. Begun by David P. Weikart in 1970, the Foundation today has a staff of 40 and an annual budget of about $2 million from public and private sources.

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OVERVIEW

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To be positive and effective experiences for children, early childhood education programs must be of high quality. A truism? Perhaps. But defining and implementing "high quality" is anything but obvious and easy when one assembles all the interested parties: government, practitioners, parent consumers, and child development and educational researchers. Acknowledging this difficulty, but at the same time recognizing the need to engage all these parties in a dialogue, John Kyle and others at the High/Scope Foundation organized a full-day session on quality at the 1983 annual meeting of the National Association for the Education of Young Children.

This policy paper includes four perspectives on quality presented at that conference. Gwen Morgan, considering the role of government, raises honest questions about what regulatory agencies should do, can do, and cannot do in the light of public attitudes. Ways that practitioners can provide high quality and developmentally appropriate services are Nancy Curry's focus, while the process by which parents can be helped to better choose among the options provided is discussed by Richard Endsley and Marilyn Bradbard. Finally, suggestions for how researchers can best contribute to the field's knowledge about the determinants of good quality early childhood experiences are presented by Hakim Rashid.

When the conference organizers first conceptualized this session, it was thought that only one contributor would deal with the "facts" from a research perspective, while the other three would present the "reality" based on field experiences in the hallways of government and the streets of our communities. What was found, however, was that such distinctions are neither real nor ultimately practical. Government regulation, for example, must be guided by what research shows to be significant differentiators of care. Practitioners must structure children's experiences around the theory and research of child development. Reciprocally, program evaluators and researchers must have their observations informed by the wisdom of the teachers who work with young children on a daily basis. And parents, as the consumers and hence ultimate regulators of the marketplace, must be made aware of their power to influence policies and practices through the choices they make for their children. In short, the collective message from these authors is that constructive dialogue must enable all of us to adopt a multiplicity of perspectives--and then to speak in a united voice to improve the quality of early childhood education in our country.

In this overview, I will briefly summarize the main points raised in each of the papers, adding issues that I believe are logically derived from the authors' own statements. The concluding section will synthesize ideas and themes that can serve as useful guides to the reader. Included is the definition of quality espoused by the High/Scope Foundation--one that is affirmed by the experiences and evidence cited by the four authors.

Government

Gwen Morgan opens "The Government Perspective" by saying that government plays three roles in child day care: regulation, provision, and leadership, or policy-setting. Although she goes on to deal explicitly with just the first of these--the regulatory function--there are implications for government's role in actually providing care, or more broadly, adopting a stance of leadership in stimulating others to provide better quality programs for children.

Morgan presents an extensive analysis of licensing. She reminds us that licensing requirements set the minimum, but that states vary not only in how high they set this minimum but also in the degree to which providers strive to go beyond it. At the other (maximum) end, from the government's perspective, are program standards that apply when the government is in the role of provider. These set the highest level for which the government will be financially responsible. In a separate category is the ideal, which we as early childhood professionals see as the definition of good quality care. Our ideal is often higher than not only base-line licensing requirements but even government-provision standards.

Morgan suggests ways that some of these discrepancies among licensing requirements, government-provision standards, and ideal conditions can be narrowed to improve the quality of services for children. To address matters of quality, government can apply its leadership role in both nonregulatory and regulatory ways. The nonregulatory mechanisms include providing incentives for training, consultation, and evaluation, as well as providing information directly to parents. Regulatory means involve fiscal monitoring, granting staff credentials (e.g., the Child Development Associate, or CDA, credential), and accrediting model programs. Not surprisingly, Morgan associates regulation with consumer protection. But as professionals, should we not also be concerned with provider protection? I am speaking specifically about staff wages. It is well known that early childhood caregivers receive very low pay; about 40% are at or below minimum wage. Moreover, the pay issue is inextricably linked to quality. We know from national studies that the quality of care received by children is directly related to the characteristics of the caregiver; if we talk about training and credentials for early childhood workers, should we not simultaneously reward them in the marketplace for the resulting improvement in the services they deliver? Higher wages could also expand the variety and competence of employees attracted to the early childhood field.

Morgan notes, however, that to put any regulatory or nonregulatory mechanisms into action often pits the government against people's rights and the will of the public. As her examples illustrate (e.g., discipline in fundamentalist-run schools, registration and licensing in the family day care system), regulation is a highly politicized issue. Also, if I am not reading between the lines too much, Morgan implies that government attempts at regulation can pit policymakers against early childhood professionals: who is to decide what regulations define good quality care?

Morgan concludes that government's powers are limited, especially until such time as there is clear public support for strategies to address quality. As early childhood professionals, it is our task to reach consensus on the meaning of quality, to effectively communicate our

definition of quality to policymakers, and to provide leadership in building public support to achieve top-level services for children.

Practitioners

In "A Developmental Perspective on Practice," Nancy Curry emphasizes our responsibility as professionals to make sure that the much-needed programs for children, from infancy through school age, are high quality. As Curry wisely points out, all programs for children are educational; children learn and adapt whether that is our conscious intention or not. Hence our concern should be not whether to educate children in programs, but rather what and how we teach them. To insure quality in young children's experiences, Curry points to a history and a future of practitioners and researchers working together to generate knowledge. And she reminds us to take the stand that early childhood education is a profession; it is time to dispel the myth that anybody can provide care for children.

As a background for effectively making her points about quality in practice, Curry presents vignettes of three different children in three different educational settings. She uses these examples to draw our attention past the necessary but superficial determinants of quality (e.g., a clean and safe environment, staff who do not blatantly mistreat children) to the less obvious but crucial components affecting children's daily experiences. We see the importance of having programs flexible enough to allow for children's unique and diverse personalities, of providing opportunities for children to exercise independence while simultaneously being nurtured, of having consistent caregivers as children separate from parents and strive to form relationships with new adults, of recognizing and supporting children's full range of feelings and abilities, and of allowing parents to feel good about the program and work with staff to insure the optimal development of each child.

Curry identifies three factors underlying the provision of high quality care: the practitioner, the environment, and the underlying theory guiding these. The practitioner, or teacher, must be well grounded in child development theory, research, practice, and programming. Although Curry makes this training sound like an advanced college course, I expect she would agree that the basic principles can be communicated to dedicated paraprofessionals through a variety of training options. Curry adds two other necessary factors for good teachers: inservice educational opportunities to refuel and expand, and good supervision to provide support and an objective viewpoint for problem solving. Note that training and supervision are features that can be instituted in programs. I do not think Curry means to dismiss that necessary and intangible practitioner quality, a genuine liking for children. But she sticks to her argument that caring is not enough. Training and supervision are what turn a good potential early childhood educator into an actual program asset.

In discussing the environment, Curry once again draws us beyond the obvious (e.g., clean facilities, equipment in good repair) to the underlying messages communicated by the setting. Good quality environments are structured to meet the developmental needs of children, not the efficiency or neatness concerns of adults. Curry also emphasizes that ideal

staff/child ratios are not arbitrary numbers but are grounded in empirical evidence of their effects upon children's social behavior and opportunities for constructive learning.

Finally, Curry describes how a good theory provides guidance and direction to practitioners as they establish an educational environment. Without this underlying philosophy, children's experiences are haphazard. A useful theory must be grounded in knowledge about how young children develop. Curry rightly cautions that philosophies derived from practice with elementary-school-aged youngsters, or philosophies that put adults' needs over children's, are neither appropriate nor effective with toddlers and preschoolers. A developmentally based curriculum for young children must provide opportunities for symbolizing events in dramatic play, chances for expressive language to grow, situations allowing for the emergence of autonomy, and above all, satisfaction of children's "intense urge to play." In Curry's examples we see how emotional and intellectual growth fuel one another.

Curry comes to the upbeat conclusion that we can give children the high quality care they deserve. She stresses, however, that theories, environments, and, above all, teachers must be consciously directed towards this end.

Parents

In "The Parent-Consumer Perspective," Richard Endsley and Marilyn Bradbard tell us that the fight for better day care focuses on the system itself (e.g., licensing, staffing) but usually overlooks the importance of parent involvement. Their point is well taken; of the three other papers in this collection, only Curry's brings up parents and even then from the perspective of how staff can better relate to them. What struck me, moreover, was that Endsley and Bradbard do not focus on parent involvement in the usual sense of what happens after a child is enrolled in a program. Instead, their concern is with the selection process beforehand. Endsley and Bradbard pose two questions: How do parents choose day care? What distinguishes parents who are successful from those who are unsuccessful in selecting high quality day care? After presenting their own research in answer to these questions, they offer practical suggestions on how professionals can help parents make wiser choices.

As to how parents choose day care, the authors report evidence that parents are neither well informed nor systematic in their search. The finding is particularly hard-hitting, since their population for this first study was a highly educated group of middle-class professionals choosing from a variety of available proprietary care options. Despite their haphazard selection procedures, these parents were concerned about quality, especially about the program's educational benefits and the competence of staff. Endsley and Bradbard conclude that what parents lacked was the knowledge to help them distinguish between good versus bad programs on these dimensions.

In a second study, one differentiating parents who are more or less successful in their day care choices, Endsley and Bradbard asked local

professionals ("experts") to rate 18 centers on a 9-point quality scale. Looking at the demographics of a mixed parent-population (i.e., working and middle-class families), they found that the single best predictor of the type of care chosen was parents' education level: the more education, the higher the quality of the program chosen. Endsley and Bradbard convincingly speculate that not only do these choices reflect the ability of well-educated parents to access information about programs but, more basically, they also mirror parental values. Parents who themselves value education look for this all-important component of high quality in the early childhood programs they choose.

Recommending strategies to help parents select good quality care, Endsley and Bradbard describe what sounds like an excellent "Parent Guide" that they have developed and field tested. They also suggest other things professionals can do for parents, from furnishing reading materials to openly discussing the research findings on factors related to choice. One problem the authors do not adequately address, however, is <u>how</u> professionals are supposed to reach parents embarking on the choice process. In a telling footnote, they acknowledge how few trained early childhood professionals, even in a college community, were familiar enough with local centers to be able to evaluate them. If professionals are out of touch with local programs, how much further removed they must be from the families who use these programs.

When parents <u>do</u> approach professionals however, then the provision of expanded resources that Endsley and Bradbard suggest should prepare them to better evaluate program quality before making choices. Instead of being armed with the typical list of available facilities, parents can be provided with a list of characteristics to observe and rate as they weigh program quality and its potential impact upon their children.

Research

Hakim Rashid's "What the Research Says (and Doesn't Say)" is not so much a statement of what researchers have found as it is a critique of how to do better research on the determinants of quality in early childhood education. Rashid's central thesis is that an adequate research strategy must employ qualitative as well as quantitative methodologies; it must force us to think about <u>what</u> we do in programs, and the effects of staffing and curriculum upon children, families, and the social fabric as a whole.

Rashid's first point is that research too often sets out to validate preconceived notions of what constitutes quality. He implies that researchers should remain open to being "surprised" by what constitutes quality, for example, to perhaps discover empirically that favored staff/child ratios can be altered without major changes in the effects upon children's outcomes and general well-being. Rashid also reminds us that research alone cannot determine the level of quality to be implemented in programs; economic and political realities may dictate what tradeoffs must be made between quality and cost. I believe we can infer from his juxta-position of these points that the value of empirically derived definitions of quality is our ability to tell policymakers what the tradeoffs are, that is, what benefits they can expect from varying levels of investment.

Extrapolating from the research on effective schools, Rashid states that the same basic principles found in research at the elementary school level apply to early childhood programs: good programs require strong leadership, high expectations that students will succeed, an orderly climate, learning focused on basic skills, and frequent student evaluation. But Rashid cautions that "basic skills" does not mean teaching preschoolers in the same way as elementary school students. He emphasizes that teaching and learning must be done in a developmentally appropriate manner. Here, existing and ongoing research in child development and education is needed to guide curriculum planners and practitioners.

Rashid makes a good case for the fact that we can gain much from expanding our research paradigms to include ecological and ethnographic studies of early education settings. This means looking at the broader external context in which education occurs--the interpersonal relationships and institutional structures of family and community. Valid research also means examining the internal factors--how experience affects the child's psychosocial development and internalization of values. In short, we cannot fix our researcher's eye on the child as an entity separate from his or her surroundings, nor as a collection of separate parts measurable with standardized tests. Rashid stresses that research on quality will be meaningful only to the extent that it approaches programs as interpersonal and structural interlocking wholes.

Expanded research paradigms, going beyond preconceived notions, also open us to multiple definitions of quality encompassing various cultural and ethnic groups. But in asking how we go about broadening our research, Rashid inevitably raises the question of who can most appropriately conduct the investigations. He poses an outsider-insider dichotomy and asks whether the "white, middle-class" researcher can really see what is occurring in the educational settings of the inner city, the barrio, or the isolated rural community. Although he makes the valid point that familiarity with these settings opens one's eyes to new possibilities, I believe Rashid overlooks the probability that an insider is as vulnerable to validating preconceived notions as an outsider. Each may operate on a different set of assumptions about what constitutes quality, but both run the risk of seeing what they want to see. The issue for the researcher is not one of insider versus outsider. It is that we must suspend our preconceptions and leave ourselves open to empirical messages in our data. This call for openness is, I believe, the conclusion researchers should draw from Rashid.

Conclusion

It is encouraging to see the recurring themes that discussions of quality have in common; clearly, early childhood educators can speak with one voice on many issues. It is equally exciting to encounter the different emphases and expansions that various professionals attach to specific issues; once the groundwork is set we will have individuals dedicated to insuring that each component of quality is fully realized.

Definitions of Quality

From High/Scope's own 23 years of experience in early childhood education—developing curricula, training supervisors and staff, evaluating programs, and demonstrating the long-term benefits of high quality programs to participants and to society--come recommendations about the components of quality, shared by our collected authors.[1] We have identified the four key players in implementing and evaluating quality—supervisors, teachers, parents, and children--and can summarize their contributions as follows.

In high quality programs, the person supervising the program displays sensitive, dynamic leadership. Teaching staff work as teams to plan and evaluate their work daily. They receive sound inservice training and employ a well-defined curriculum based on consistent principles of learning and development. Parents become involved in the child's education and development, in partnership with the teachers or caregivers. The children are actively involved in what they are supposed to be learning, and they receive feedback about their learning from others.

Synthesizing the collected wisdom of the conference participants, of High/Scope, and of colleagues in the field, we can return to the two questions raised in the conference title: How do we define high quality in early childhood education? How do we encourage it? The definition of quality has three integral components:

1. A developmentally based curriculum--It should be grounded in theory, research, and practice. Such a curriculum is not a scaled-down version of elementary-school techniques but is attuned to the unique developmental needs of toddlers and preschoolers. Within this developmental framework, there is room for much curriculum diversity; relative emphases on academic, socioemotional, and cultural components can all be handled in ways appropriate to young children. A curriculum provides the framework for teachers to make consistent decisions about a program's day-to-day operations and long-range objectives. And the underlying philosophy of a curriculum is what sets the mood and tone of the educational environment. From these surroundings, children internalize values about their own importance in the world and about the skills they will need to acquire to participate in it fully.

2. Staff training and supervision--Caring about children is not enough. Staff working in the classroom must know about child development and how to implement a curriculum to enhance that development. Supervisors and administrators must be knowledgeable about all aspects of program management; a person who works well with children is not necessarily prepared to deal with adult staff, and vice versa. Finally, training does not stop when one is hired to enter the classroom. Ongoing education is as important to adults as to children; inservice training continues growth and maintains interest. Regular supervision can insure that what is learned in training is practiced in the classroom.

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[1] See the list of High/Scope publications at the front of this publication.

3. Ongoing evaluation--Although the importance of research and evaluation is clearly implied in all we have reviewed, it must also be identified as an explicit component of quality. All programs need at least some mechanism for internal evaluation. Strategies may be quantitative or qualitative, depending on a program's interests and resources. Too often evaluation, if it exists at all, is confined to some form of fiscal monitoring. Accountability however is not limited to money. Early childhood programs must be accountable to the children and families they serve. Ongoing evaluation is necessary for programs to regularly examine whether the goals they espouse for participants and providers are being met.[2]

Defining quality is largely a matter internal to programs, but encouraging quality requires that we go outside as well. The foregoing review suggests two factors that are dynamically linked and essential to insure high quality in early childhood programs:

1. The players--Participants at all levels are necessary to implement high quality programs. Consciousness must be raised so that "quality" takes its place alongside "availability" and "affordability" in the nationwide debate about programs for young children. Government must be responsive to the definitions of quality emerging from the professional community; regulatory and nonregulatory mechanisms must be used to require--and invite providers to surpass--the basics of good programs. Practitioners must define themselves as professionals as a first step in gaining appropriate recognition for the seriousness and importance of their roles; training and pay scales should be commensurate with this elevated status. Finally, parents must be educated about the impact of quality upon their children and then encouraged to use the "power of the pocketbook" in rewarding high quality programs with their patronage and in closing down or reforming those in need of improvement.

2. The demand--From the players just listed must come the momentum for high quality early childhood education. We--policymakers, professionals, parents--must demand good services for children. And to this "we" should be added the general public. Policy will not change without broad support, and broad support will not be forthcoming until society realizes the potential impact of early childhood programs on all of us. There is no such thing as programs having "no effects." At best, bad programs mean a loss of potential; at worst, they mean developmental difficulties for children, which the educational and economic systems eventually inherit. But we now know good programs can mean getting children started on a path of educational and interpersonal success, with payoffs for participants and taxpayers alike.

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[2]L. J. Schweinhart, "Quality in early childhood education: The key to long-term effectiveness." Paper presented at the Kindergarten Conference of the Oakland (Michigan) Intermediate School District (1983).

High quality early childhood education programs benefit all of us; no one who cares about today's youth and tomorrow's adults can remain silent about our need to better serve children and society.

THE GOVERNMENT PERSPECTIVE ON QUALITY

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Government has three broad functions in relation to child day care: (1) it regulates the service; (2) it provides the service in some cases, either directly or through purchase of service or grant; and (3) it sets goals and provides policy leadership by means of coordination, ancillary support services, and indirect funding through tax policy. Although this paper will consider how the government can and should address quality in both regulatory and nonregulatory ways, I will focus most heavily on the regulatory functions of government, to assist early childhood specialists in better understanding them.

Nonregulatory Functions

The major nonregulatory actions government can take to improve quality include these:

- Providing funds for training of staff
- Providing consultation
- Printing newsletters, publications
- Encouraging internal evaluation
- Providing consumer information to parents
- Stimulating resource and referral centers that help parents choose
- Providing leadership in community education on the importance of quality

The Regulatory Function

Government regulates in many ways. The two ways most important for the quality of child care are licensing and purchase-of-service monitoring. When parents pay for their own child care without direct subsidy, only licensing regulates the quality. Since the major source of government financial help now comes from the tax credit on personal income tax, licensing is the only form of regulation applied to most child care.

Licensing needs to be seen as one part of the overall policies affecting child care. In states with complete licensing coverage, it affects all programs, not just the ones with government money. We should

judge the effectiveness of the state's licensing system not only by whether its standards are high or low but also by whether the state covers all forms of child care in its licensing, whether the standards are implemented fully and no programs are permitted to flourish that do not meet them, whether the system has broad general support, and whether the state has committed adequate numbers of staff and trained them.

Licensing's major purpose is to establish and implement a level of quality that the citizens of a state consider necessary to reduce the risk of harm whenever children are in child day care. This basic consumer protection should never be traded off in our zeal to find ways to stimulate high quality.

The licensing requirements, as in any regulatory policy, are always minimums. This means that the state determines that all existing programs must at least meet the basic licensing requirements, which therefore establish the line that it is illegal to fall below. The minimum is not by definition a low standard. It can be set very high or very low, depending on the public support for quality. If licensing required a master's degree for every teacher aide and a ratio of two children for every staff person, that would be a minimum requirement.

These minimum requirements are therefore not specifications. They need not be met precisely; program providers are free to go beyond them. This characteristic of setting a base line is typical of licensing policy in contrast to funding policy, in which the standards are likely to become maximums beyond which the government does not offer funding.

The state of the art in child care in a given state will not be at the licensing level but will be heavily influenced by where the state has set its base line and by other nonregulatory actions the state has taken to inspire quality beyond the base line. These factors interact to account for strong regional differences across the country in child care quality.

Child care in the New England region has reached a fairly high state of the art. There, as elsewhere, providers go beyond what is required and generally have better group size and staff/child ratios than are specified in the licensing requirements. There is no question that the comparatively high minimum requirements of licensing, and the public support for them, have lifted the program quality above what it was twenty years ago. Yet the relationship is complex. In Connecticut, for example, there is no child/staff ratio specified in the licensing regulations. Yet the ratios in Connecticut programs in general are what one would consider high quality. That may be because the providers themselves became committed to that level of quality when ratios <u>were</u> required; it may be because the state of the art in the region is generally high, and training is both required and readily available; it may be because Connecticut couples its licensing with other nonregulatory policies of consultation. Undoubtedly, the existence of a licensing system committed to quality and the public support that led to it have played a major part in the development of quality in child care programs in that state.

Characteristics Covered by Licensing

Table 1 describes some key licensing requirements in place in March 1981, as applied to centers with 4-year-old children.

As always, a table like this does not give us enough information, particularly about staffing requirements, which are approached in unique ways by many states. But it shows that most of the states are regulating ratios, and it shows us that fewer of them are regulating the important characteristic of group size. Some other characteristics of child day care covered by licensing have traditionally been discipline, parental role, programs, and health and safety policies.

Discipline has become controversial in recent years, with fundamentalist groups challenging the right of the state to outlaw corporal punishment in day care. That issue is behind much of the effort to exempt church-run day care from licensing.

Many states have detailed requirements that parents be permitted to be involved in programs through participating in staff conferences, serving on boards, visiting in the classroom, and being given material on the program's goals and philosophy. About half the states guarantee parents the right to make unannounced visits to the child day care program at any time. Because of the recent media coverage of scandals, the public is much more aware of the potential of sexual abuse in child care, even though its incidence is rare. Provisions guaranteeing parents' rights to visits are probably the best regulatory protection that states could offer to prevent sexual abuse. We know through research findings that parent involvement is related to the effectiveness of programs, so this topic would be an issue of quality even if it were not an important protective measure.

Some but not all state licensing requirements include very detailed program specifications. There are several reasons why only some states have such specifications. A few states believe it is appropriate that government regulate only for health and safety of children. That position is philosophically controversial, however, because health professionals attest that the health of children is dependent on whether their basic human needs for love, smiles, talking, and touching are being met; physical health itself requires caring staff. A more important reason for avoiding detailed program specifications is to avoid introducing too much bureaucracy into the professional area of curriculum, where staff and parents should have a great deal of autonomy and control.

Health and safety requirements are very detailed in most states. Recently two areas of concern are getting more attention: infectious disease concerns are leading to more detailed requirements for diapering and handwashing in infant programs, and in response to sexual abuse, a federal law has mandated that states with federal funds implement criminal records checks.

Health and safety aspects of day care are regulated not only through licensing agencies but also through other regulatory bureaucracies, each with its own rules and inspectors. Unless these agencies work together, red tape becomes a serious problem for start-up of new programs.

Table 1

COMPARATIVE LICENSING STUDY OF CHILD CARE CENTERS:
SELECTED LICENSING REQUIREMENTS, MARCH 1981,
FOR GROUPS OF 4-YEAR-OLDS

State	Child/Staff Ratio[a]	Group Size[b]	CDA Required[c]	B.S./B.A. Required[d]
Alabama	10:1	10	Draft	NS
Alaska	10:1	NS	Draft	NS
Arizona	15:1	NS	Yes	NS
Arkansas	15:1	NS	Yes	NS
California	12:1	NS	Draft	NS
Colorado	10:1	NS	Draft	Yes
Connecticut	NS	NS	Draft	NS
Delaware	15:1	NS	NS	Yes (EC)
District of Columbia	10:1	20	Yes	Yes
Florida	20:1	NS	NS	NS
Georgia	10-15:1	NS	NS	NS
Guam	15:1	NS	NS	NS
Hawaii	15:1	NS	Yes	Yes
Idaho	10:1	NS	NS	NS
Illinois	20:2	20	Yes	NS
Indiana	12:1	NS	NS	NS
Iowa	12:1	NS	Draft	NS
Kansas	10:1	20	Yes	NS
Kentucky	10:1	NS	NS	NS
Louisiana	16:1	NS	NS	NS
Maine	10:1	NS	NS	NS
Maryland	10:1	20	Yes	NS
Massachusetts	10:1	20	NS	NS
Michigan	12:1	NS	Yes	NS
Minnesota	10:1	NS	Yes	NS
Mississippi	NS	NS	NS	NS
Missouri	10:1	NS	Yes	NS
Montana	10:1	12-15	NS	NS
Nebraska	10:1	NS	Yes	Yes (EC)
Nevada	5:1	NS	Yes	Yes
New Hampshire	15:1	NS	NS	NS
New Jersey	15:1	NS	Yes	Yes
New Mexico	15:1	NS	Yes	NS
New York	8-1	16	Yes	NS
North Carolina	15:1	18	Yes	Yes

(continued)

Table 1 (continued)

State	Child/Staff Ratio	Group Size	CDA Required	B.S./B.A. Required
North Dakota	6:1	NS	Yes	NS
Ohio	15:1	30	NS	NS
Oklahoma	12:1	NS	Yes	NS
Oregon	10:1	20	Yes	NS
Pennsylvania	10:1	NS	Yes	NS
Puerto Rico	15:1	NS	NS	NS
Rhode Island	10-15:1	NS	NS	Yes
South Carolina	15:1	NS	Draft	Yes
South Dakota	8:1	20	Yes	NS
Tennessee	15:1	20	NS	NS
Texas	18:1	45	Yes	NS
Utah	15:1	25	Yes	Yes (EC)
Vermont	10:1	12	NS	NS
Virgin Islands	15:1	NS	NS	NS
Virginia	10:1	NS	Yes	NS
Washington	10:1	20	Yes	NS
West Virginia	12:1	NS	Yes	NS
Wisconsin	10:1	20	Yes	NS
Wyoming	10:1	NS	NS	NS

Note. From "Child care and the states: The comparative licensing study" by R. C. Collins, 1983, Young Children, (38)5, p. 8. Copyright 1983 by National Association for Education of Young Children. Adapted by permission.

[a]Child/staff ratio is the state's regulation pertaining to 4-year-old children. Where more than one requirement is indicated for 4-year-olds (e.g., ages 3 to 4 and 4 to 6), the rule for the younger age-range is included. When no requirement is specified, it is noted NS (not specified).

[b]Group size is reported for 4-year-old children on the same basis as for child/staff ratio.

[c]The information on state regulations for the Child Development Associate Credential has been updated from the Comparative Licensing Study based upon information in ACYF files and is current as of April 1983. For more information on CDA, contact Mrs. Sylvia Pechman, Head Start Bureau, ACYF, P.O. Box 1182, Washington, DC 20013.

[d]When state requirements for a B.S. or B.A. degree specify that the degree must include a specialization in Early Childhood Education or Child Development, EC is noted in the table.

Levels of Standards

Licensing establishes a basic floor for quality. A ceiling is represented by the goals of the profession. Between the floor and the ceiling, there are a number of regulatory and nonregulatory actions the state can take to enhance quality. Table 2 describes the levels, or types, of standards that are related to different regulatory methods.

Table 2

METHOD OF REGULATION RELATED TO TYPE OF STANDARD

Regulatory Method	Type of Standard
Ceiling of Quality	
Accreditation of model programs	Professional standards for high quality programs
Granting staff credentials	Standards for competency or education
Fiscal monitoring	Standards for certification for funding (rate-setting should reflect cost of meeting standards)
Administrative accountability for government-run programs: approval	Administrative standards at least as high as those used for licensing private programs
Basic preventive forms of regulation: licensing, safety, health	Licensing requirements, building codes, health codes
Floor of Quality	
Operating a program below an acceptable standard or without a license is illegal.	

The accreditation method best assures the highest type of standard. This is a method technically available to government, but better carried out in the private sector by a peer group. Accreditation plans of the National Association for the Education of Young Children will achieve this level for child day care centers, if successful. Some family day care peer groups have worked on an accreditation plan for homes at the local level.

Government functions need to be seen in a context. Table 3 exhibits three tiers of quality standards, some or all of which could be established by government policy.

Table 3

THREE TIERS OF QUALITY STANDARDS

Type of Standard	To Whom Applied	By Whom Established	Legal Base	Process of Writing
Licensing standards	All child day care programs	Licensing agency	Delegated authority from the legislature	All interests represented in a democratic process that includes parents, providers, experts.
Purchase standards	All programs using funds from the government by purchase contract or voucher	Funding agency	Contract relationship	Agency specifies by internal process; may be affected by negotiation with providers.
Accreditation standards	All who voluntarily seek it	Varies; best done by peer group	Voluntary participation	Professional.

All three tiers could be recognized, or the tiers could be collapsed into two. For example, if states were fully subsidizing parent purchase of care on a sliding fee scale, they would be able to raise their licensing standards to the purchase level. States wishing to keep their licensing level low, on the other hand, might decide to purchase only accredited services. Neither of these policies is likely to develop in the present climate.

Limitations on the Power of Government Through Licensing

On the face of it, licensing is a powerful legal protection for children. Yet, there are major limitations on licensing power. There are no simple and pure rights anywhere in society. Every right clashes with someone else's rights, and all regulation requires tradeoffs. Specialists who work with children usually equate needs with rights, in a human rights context, with little understanding of the complex tradeoffs in legal rights in the regulatory field. Children's rights often lose priority to adults' rights because children are a powerless group.

For a long time, providers' rights to fair treatment sometimes overrode children's rights to have the requirements enforced in a timely way. Today, hysteria over sexual abuse may overcompensate for this problem and create some injustice to innocent providers. To strengthen children's rights in day care, states need to improve the enforceability of their laws, and they need much better training for their licensing staff in law enforcement. Most states also need more licensing staff.

A second limitation on the power of licensing involves the will of the public. Government depends on the consent of the people. Requirements cannot be made unless providers are able and willing to meet them, parents are willing to pay for them, and the general public is willing to support their enforcement. The standard-setting process itself is therefore important as a way of achieving a consensus among all interests about where to set the base line of requirements at a given time.

The history, values, and culture in a state influence what can be accomplished in regulatory policy. One interesting clue to the general support for quality, state by state, is the percentage of full day centers that have child development specialists on their staffs for 3-5 year olds, as shown in Table 4. The range is 12.8 percent in Louisiana to 68.9 percent in Vermont. The wide variation probably reflects differences not only in what states require but also in what requirements the public supports.

Table 4

FULL DAY CENTERS,
SELECTED PROFESSIONALS ON STAFF, BY STATE
(PERCENT OF CENTERS)

State	Hearing, Speech, or Vision Specialist	Social Worker	Nurse	Psychol-ogist	Child Development Specialist
Alabama	11.1	27.7	30.0	6.9	30.5
Alaska	4.5	12.8	34.8	4.5	37.8
Arizona	9.5	11.9	14.7	7.1	35.7
Arkansas	10.0	26.8	15.1	7.5	20.0
California	11.9	16.3	24.2	15.6	42.3
Colorado	0.0	11.1	11.5	5.5	44.4
Connecticut	2.2	31.1	44.5	8.8	35.5
Delaware	0.0	20.0	20.6	5.7	54.2
District of Columbia	10.0	20.0	15.5	12.5	35.0
Florida[a]	6.4	14.8	17.2	5.8	29.8
Georgia	1.4	25.1	14.8	2.8	27.3
Hawaii	11.9	19.0	22.1	11.9	50.0
Idaho	0.0	9.3	3.2	0.0	31.2
Illinois	8.4	23.5	19.0	10.0	50.4
Indiana	13.6	25.0	28.1	4.5	29.5
Iowa	2.4	24.3	22.6	12.1	36.5
Kansas	19.3	29.0	23.2	16.1	61.2
Kentucky	13.4	21.1	11.9	3.8	32.6
Louisiana	4.2	12.8	13.2	2.8	12.8
Maine	21.4	25.0	14.7	21.4	50.0
Maryland	8.3	20.8	23.6	8.3	45.8
Massachusetts	10.8	41.3	22.4	6.5	54.3
Michigan	6.3	14.8	19.7	10.6	48.9
Minnesota	0.0	7.5	10.3	0.0	37.5
Mississippi	12.5	33.3	24.7	11.1	25.0
Missouri	4.1	20.8	8.6	6.2	29.1
Montana	7.4	22.2	19.1	0.0	37.0
Nebraska	21.4	21.4	22.1	10.7	39.2
Nevada	8.8	5.8	21.2	0.0	29.4
New Hampshire	3.5	21.4	44.2	7.1	35.7
New Jersey	5.4	29.7	30.6	6.7	50.0
New Mexico	2.5	12.8	15.8	2.5	38.4
New York	3.5	25.8	56.1	6.2	42.8
North Carolina	9.2	13.2	26.2	7.0	28.8
North Dakota	5.8	17.6	24.2	0.0	35.2

(continued)

Table 4 (continued)

State	Hearing, Speech, or Vision Specialist	Social Worker	Nurse	Psychol-ogist	Child Development Specialist
Ohio	9.1	18.3	26.0	13.7	37.9
Oklahoma	0.0	6.2	9.6	4.6	23.8
Oregon	2.0	12.5	6.4	2.0	41.6
Pennsylvania	8.0	72.0	37.1	17.3	50.0
Rhode Island	0.0	30.4	35.8	8.6	43.4
South Carolina	14.0	33.3	47.1	7.1	26.7
South Dakota	0.0	20.0	4.1	8.0	40.0
Tennessee	12.9	32.2	14.3	9.6	29.0
Texas	3.8	16.8	18.3	5.9	24.4
Utah	11.7	17.6	12.1	5.8	41.1
Vermont	13.7	20.6	35.5	10.3	68.9
Virginia	9.7	14.6	31.9	7.1	23.8
Washington	13.0	19.5	22.4	8.6	45.6
West Virginia	3.5	25.0	14.7	7.1	35.7
Wisconsin	7.1	19.0	9.8	4.7	52.3
Wyoming	18.7	6.2	32.2	6.2	25.0
U.S.	7.6	21.0	22.8	7.8	35.1

Note. From Day care centers in the United States: A national profile 1976-1977 (Table 117) by C. Coelen, F. Glantz, & D. Calore, 1979, Cambridge, MA: Abt Associates. Copyright 1979 by Abt Associates. Reprinted by permission.

[a]Data for only 17 of 67 counties.

Family Day Care Regulation

Family (home-based) day care presents a major challenge to regulatory policy. The past two decades have seen an enormous growth in employment among mothers, many of whom choose to or are forced to use family day care. Regulation of this extensive day care system poses a problem because such a large number of parents are already using this type of child care regardless of its regulatory status.

Alternatives for regulating this form of care have many variations but generally fall into three categories: deregulate it, develop some feasible way of covering it through a regulatory method, or license it the same way that centers are licensed (Morgan, 1974, 1980).

Traditional licensing methods would require massive increases in staff to achieve routine inspection of family day care homes. The approach of the sixties would have been to retain the licensing responsibility in the hope that adequate staff commitment might eventually be made. In today's legal climate, however, government risks lawsuits and public scandal with political repercussions when it promises a protection it cannot deliver. If the state cannot respond to providers seeking to become licensed, it either becomes an obstacle to the growth of the service or it encourages disrespect for the licensing law, which could ultimately affect center regulation.

Deregulation means removing some or all of family day care from the licensing definition. Voluntary licensing and voluntary registration are actually forms of deregulation, since they do not offer base-line protection to all children, even though they offer some recognition and status to providers seeking to be known for quality. States that license only homes with four or more children, or homes with children from more than one family, have partially deregulated policy. States that license only homes that have public funds are implementing a funding policy, not a licensing policy.

Registration is a regulatory strategy, not a deregulatory one. Its aim is to reach all the homes that are providing care for children and to regulate them. Although one state has a registration policy that only collects names and addresses of registrants, most states that have adopted registration plans have set up systems with the following characteristics:

- Standards for homes are established, which are mandatory.
- Providers are required to register the fact that they are caring for children and to certify that they meet standards.
- Providers are not inspected at the time of registration.
- Parents are given the responsibility of ongoing checking to see that standards are met.
- Routine inspections are made on a routine basis by the regulatory agency.
- Parental and other complaints are investigated.
- Homes that do not meet standards must either come into compliance or stop caring for children.

Compared to one in which providers cannot lawfully care for children without prior inspection, this system appears better able to cover the volume of home providers without becoming a bottleneck. It may also be an improved regulatory method because of its emphasis on the role of parents. Although registration appears to be working (Texas Department of Human Resources, 1980), it could get bogged down unless the system is computerized. Some states are finding that the rapid turnover in family day care can make manually done lists of registered homes obsolete.

Further, states have found that without the routine random inspections, compliance deteriorates. At least 10 to 20 percent of the homes must be visited each year.

The licensing of family day care agencies, or systems, would be another possibility for improving state policy. Traditional licensing practice would be possible because of the smaller number of units needing licensing. The state could license one central agency and all its member homes with one license; the agency would monitor its own homes to assure compliance with its license. This improvement in policy would not be a complete answer to the issue of regulating family day care, but it is feasible as a way of regulating at least those homes that are linked up in systems.

Group Homes

Another type of child care that needs licensing is group homes--the care of between 6 and 12 children in a residential setting, with adequate staffing to meet ratio requirements. When state licensing does not include such a group home category, family day care homes are forced to seek a center license (rather than merely adding staff) when they take in one child beyond the definition of family day care. This can be one factor keeping family day care underground.

It is not likely that group homes would ever be very numerous. In those states that license them, there are not many. They are a potential high quality service that should be encouraged, even though there may be only a limited number of residential settings able to meet requirements.

Approval

Licensing applies to programs operated in the private sector. When the state itself operates a program, or when a public agency such as the public school system runs programs for young children, licensing does not apply. The major reason that licensing is not an appropriate tool for regulating public agencies is the fact that public agencies have their own mandates and permissions to operate from legislative bodies. The licenser cannot remove a license, or permission to operate, when the legislature has given permission in another law.

However, public programs should not operate at a level of quality lower than that required of the private agency through licensing. Some states have language in law that requires the public program to meet the same standard used in licensing. The term used is "approval," not "licensing." The approving agency might be the agency operating the program, or it might even be the licensing agency. In the case of local public schools, it could be required in state law that early childhood programs must be approved by the Department of Education as meeting standards at least as stringent as those applied by the licensing agency to programs serving children of the same agency.

Fiscal Monitoring

When government buys or creates a service through grant or contract, it can establish specifications for the quality it wishes to support. Head Start's performance standards, the now defunct federal day care requirements, and state standards for certification for funding are all examples of purchase or grant specifications. Since federal requirements for day care were abolished in 1981, the states now determine standards for purchase.

Funding requirements differ from licensing ones in several important ways. The relationship of the state to the provider is that of purchaser or granter, rather than licenser, and is based on contract law, not on the police powers that governments use in the public interest. In many ways, funding requirements are a less powerful tool for policy setting than are licensing requirements, since funding only affects those day care children who are eligible for public subsidy.

The way in which a state exercises its purchase power certainly affects quality. If states have established program standards for contracted child day care, for example, but not for vouchers, they are setting up inequitable quality for children whose care is funded by different mechanisms. Most states do not pay for child day care with a rate of reimbursement that covers the cost of meeting high quality standards. The rate setting process itself, therefore, is an avenue for working toward improved day care quality.

Many other fiscal policies, not found in program standards, may affect quality. For example, one major policy issue that early childhood professionals should address is the issue of continuity for children and families. We know that children need to be able to depend on the continuation of their day care relationships once bonds of love and trust are established. Yet government policies will terminate children, or move them to other programs, as categories of eligibility change. We need in every state a recognition of the principle of continuity for children and families. This could mean, for example, institution of a sliding fee scale that would accommodate children for whom family income improves but who entered the system as low-income.

Granting Credentials

In many ways the emphasis on program standards and requirements reflects a lack of emphasis on qualifications of the people who provide child day care. The less we can rely on there being qualified people providing care, the more we have to control programs with standards and requirements. If we would place greater emphasis on requiring qualified family day care providers, center directors, and center staff, we might make a tradeoff for some of the program detail presently in our licensing requirements.

For family day care, we might consider simply requiring some kind of credential that assured that some agreed-on modules of training or some competency assessment had taken place. A Child Development Associate (CDA)

credential, such as the one developed federally, could be encouraged by states. If the state or locality has basic building safety standards for residential occupancy by families, a family day care provider might be regulated by only one requirement other than the credential: the number of children permitted in the home.

Given the present widespread provision of family day care by non-credentialed people and the lack of a credential system, it would not be possible to set up that sort of system immediately in most states. An intermediate step might be a voluntary credential system, which could offer the incentive of paying higher subsidy rates when caregivers gain credentials. Family day care providers would welcome such a voluntary system, which would increase quality in homes that participate and would offer recognition of those good quality homes so they could distinguish themselves from custodial caretakers.

For child day care centers, the CDA credential is recognized in a number of states' licensing requirements as one of several alternative paths to meeting the requirements for a classroom teacher/caregiver. Assistant caregivers can enter the day care system without credentials and can work toward the credential through training and supervised experience.

A few states have another embryonic credential in their licensing requirements. In these states, every center is required to employ someone with special knowledge of young children. Small centers must have one such person; larger centers must have more than one. The intent is to assure that there is some expertise, so that all teachers have access to at least one role model and so that there is a person who can plan training for the whole center. Role relationships and tasks for this person are not rigidly spelled out, since the person's presence is not a program specification but a policy requirement. This person with specific knowledge might be called, for example, a "supervising teacher," a "child development specialist," or a "head teacher." The variety of names tends to cause confusion.

The combined qualifications of this person usually are similar to those of the Department of Education for teacher certification, except that the licensing agency can spell out a variety of ways of meeting the requirement that include a combination of training with years of experience working in a child day care program. The concept of offering a variety of career-paths toward professionalism is an important one in the early childhood field. It enables members of a child's low-income and minority community to enter the field, have years of successful teaching with in-service training, and eventually gain recognition in a higher role through participating in higher education opportunities. This circumvents the kind of permanent barrier so often set up by teacher certification requirements. With this kind of training model, the field could continue to be uncompromising on low group-size, and favorable child-staff ratios, while achieving higher salaries for top professionals, and a clear opportunity for a career-path upward for the classroom teacher.

Supporting the further development of this two-level approach to professionalism would improve the quality of child day care in all the states. However, it is difficult for most professionals to visualize a

structure so different from that of the public school. The emphasis on improvement is likely to continue to be at the "teacher" level, simply because it is easier to understand.

This person who is called the "head teacher," or "child development specialist," in a center is not necessarily equipped to be an effective program administrator. There should also be a credential for directors of child day care programs (as distinct from administrators in large agencies and public schools). Only two states require administrative training for child day care directors.

Effective Government Strategies

Government powers are limited. Clear public support is needed before strategies can effectively address quality. Early childhood professionals have the greatest knowledge about quality and therefore the greatest responsibility to offer leadership in building public support for the combination of basic consumer protection, funding policies, and other government support that will result in quality.

During the past ten years, confusion has weakened effective consumer protection. During the debate over federal standards, lack of clarity over the difference between fiscal requirements and licensing requirements has undermined both, and has weakened licensing in the states. This lack of clarity existed in the sixties. One expert in licensing challenged the field as follows:

> Are you protecting children, their parents, society, your professional values, legal rights, human rights, the provider from unnecessary competition, or the pocketbook of the purchaser?...It is because these questions seem so obvious that we frequently give them little thought, assuming everyone is in agreement on the answers. The results are rules which are unclear, unenforceable, and unsupportable (Stumbras, 1971).

At that time, few saw that the growth in public funding and the greater emphasis on rights and due process in the legal field would mandate that we become much more clear by the eighties. Lawsuits against states for failing to live up to their regulatory responsibilities have brought a new awareness of the potential liability of the state and have rendered impossible a strategy of high and unenforced standards. Moreover, we are trying to improve quality during a period when there is ambivalence and sometimes hostility toward the regulators, even within the field.

Theories of Deregulation

There is agreement among both liberal and conservative lawmakers that some types of regulation should be abolished and that others should be reformed. The rhetoric of deregulation is obscuring the need for greater precision in distinguishing between what regulation is desirable to keep and

what regulation is on its way out. For example, we deregulated control of airline routes and prices, but not the control of pilot qualifications or safety measures for the equipment.

As this example demonstrates, regulation by government is not all of the same type. Four categories of regulation provide some useful distinctions:

- Regulation of prices and entry into a field
- Regulation of the quality of services, the environment, or products, for protection of the public
- Regulation to provide accountability for the public dollar (administrative red tape)
- Regulation of the states by the federal government, or of local governments by the states

The first category, control of prices and entry into the field, includes attempts to remedy economic instabilities. Large federal commissions regulating entire industries, such as the Federal Communications Commission, are in this category. It also includes occupational licensing when the major concern is to limit competition and control the market. This type of regulation is seriously questioned by scholars and policy-makers who challenge whether such control of competition is really in the public interest when it leads to higher costs to the public. It is suggested that these regulators are held captive by the regulated industry.

Both the licensing and credential requirements of day care could be seen in this controversial category. If the emphasis of the credential is on the needs of children and their parents for quality care, its value is less in question than if the emphasis is on the needs of caregivers and is an attempt to limit growth of forms of care. Of course, the needs of caregivers deserve attention; the government might pay greater attention to these needs if they are approached as labor regulation.

The second category includes various social regulatory agencies involved in consumer protection and citizens' rights. Unlike the agencies in the first category, these agencies are seldom popular with the industries they regulate because they take the position that the public interest takes precedence over economic gain. These types of regulation clearly have value (as in the case of preventing the use of thalidomide in this country), particularly in any situation where the public cannot choose on an individual basis whether to expose themselves to known risks. Critics claim that this type of regulation does not always take into account the costs of the benefit, or the clashing demands of different social goals. But, strong public support will continue, particularly for regulation in response to disasters and perceived threats, such as recent cases of child abuse in day care. Cost and impact analysis will become more and more common. Adoption or continuation of regulation will depend on the public perception of the dangers averted and on the costs of averting them.

Day care licensing has a long history of genuine consumer protection, and its rhetoric should more clearly identify it as this type of social

concern. Public health was one of the oldest and first agencies to protect the public against hazards and offer various forms of regulation of this type. Building safety regulations can be seen in the same way, and they have shifted in emphasis from the protection of property to the protection of life.

The third category of regulation provides accountability for public funds. This type of regulation appears to be exempt from official reform, even though public opinion is strongly against red tape.

The fourth category is regulation of one level of government by higher levels of government. The present administration has made a determined effort through block grants to reduce federal control over state policy. At the local level, there is strong resistance to state mandates and controls.

These four categories of regulation are very different from one another. Despite the tendency of current rhetoric, broad generalizations are not valid. Most of the criticism of the regulatory agencies stems from study of the first category of regulation. However, with the exception of hospital services, regulation in social services has received little study.

Behind the criticism has been a theory that the regulators are inevitably captured by the regulated industry (Stigler, 1971). The theory includes the concept that a regulatory agency has a life cycle, beginning with a youthful commitment to its mission of protecting the public. As it encounters the checks and balances on its powers, it learns to adapt to these realities and to become friendly with the regulated, with whom it has much in common. In its organizational old age, it maintains the status quo and at worst becomes the captive of the industry it regulates (Bernstein, 1955).

These theories are a generation old and have reached the public consciousness and the Congress. They may never have been completely valid across all types of regulation (Wilson, 1980) and may not be totally applicable to day care regulation, which has not been studied from this perspective. Furthermore, there is evidence that inventive regulatory reforms have already been instituted to avoid anticipated dangers of agency senility or capture. More recent theorists, observing these successful efforts, suggest a new concept of "recycling" that implies a deliberate revitalization can take place. This is in contrast to the bleak determinism of the life cycle theory on the one hand or a naive optimism on the other (Moore, 1972).

Applying these ideas to day care, we can conclude that any effective regulatory strategy should ally itself with regulatory reform, should build in devices for renewal, and should display a commitment to consumer protection goals.

Child development specialists in their advocacy efforts may inadvertently trigger "capture" theories without ever being aware of it. It is important to make a conscious effort to avoid giving the appearance that licensing represents the interests of the providers of care at the expense of children and their families or that licensing is used as a device to restrict the amount or type of care available to parents.

Reform of the Regulatory System

Each state is different, and each will have its own specific changes for improving its regulatory system in the eighties. All will need to be sure that there is adequate staffing for the needed tasks and to be equally sure that the needed tasks are feasible with a limited amount of tax support--any plans for massive expansion of staff would probably lead to deregulation instead of regulatory reform.

In all the states, licensing needs a new image as a vigorous consumer protection program that involves parents in new and creative ways and safeguards children from harm that would occur without the regulatory protection. The following are some reforms that I have mentioned earlier and other actions that might improve the regulatory systems:

More effective licensing. These steps should be considered:

- Modestly increase licensing staff for centers and group homes; have realistic work loads based on number of licensed units and expected growth.

- Have Civil Service requirements for licensers that guarantee knowledge of law enforcement, rights of licensees, and basic concepts of regulatory administration, as well as child day care programming and management. Consider requiring center licensers to be former day care directors.

- Centralize licensing management, rather than diffusing quality controls into regional operations. Assure local interest in some way, possibly by local advisory groups to the licenser.

- Develop licensing requirements for group homes, and license them.

- Register family day care homes; computerize process; have an adequate number of registrars to inspect at least 20 percent of the homes annually.

Licensing enforcement and improved compliance. Possible reforms are these:

- Explore quality indicators. Rather than checking all requirements on every visit, establish a dozen or fewer key factors that correlate with overall compliance, and check only the quality indicators on most visits. Let noncompliance indicate need for more visits to those centers in greater need of attention (Fiene, 1983).

- Examine statutes and make changes needed to assure a range of tools for implementation: powers to inspect, injunctive powers, fines in cases where revocation is too harsh a penalty.

- Use public awareness more--by publishing lists of providers with high compliance, by posting notices of violations at programs. Develop rewards for high compliance and timely cooperation.

- Involve providers in the appeals procedures. A peer panel will be fair to providers and may be less likely than a hearing official to overprotect them.

- Develop routine procedures and working relationships with resource and referral centers, so they are informed about pending actions and violations of requirements.

- Develop policy and possibly statutory change to clarify state responsibility when children in day care are abused and neglected; clarify the respective roles of licensing and child protection regulations.

Improved standards. Standards might be improved in these ways:

- For use by states at the time of revising requirements, either the federal government or a national organization should maintain an ongoing record of current state requirements for licensing, building code requirements for day care, and any specific day care sanitation codes. The same organization should keep information about research findings relevant to any requirements, to justify adding, keeping, or dropping requirements when knowledge changes.

- Consider adding the standards development process to the licensing statutes, to assure that licensing agencies follow sound practices of interest representation and consensus building.

- Develop orientation materials for participants of a task force charged with setting standards, to assure good communication and full understanding of the nature of licensing requirements.

A stronger role for consumers. Consumer input could be increased:

- Provide a greater role for parents in routine inspection and reporting on compliance; provide more routine channels for consumer feedback.

- Strengthen the complaint mechanisms and educate the public and parents to use them when noncompliance is observed.

Encouragement of day care development. Barriers to day care development might be lessened by these measures:

- Build a separate start-up and technical assistance office to help new applicants get their license and to assist employers and other groups interested in starting day care. Separate this assistance from the licenser, but assure that they work together.

- Amend state zoning enabling legislation to permit centers and group homes in any zone as an educational community service that enhances the community; permit family day care as a customary home occupation. Require local zoning ordinances to use definitions that reference state licensing definitions.

- For independent family day care homes, write one licensing code that incorporates requirements for building safety, sanitation, and licensing, with only one inspecting agency for any requirement not applying to residential occupancy.

- For new centers and group homes, develop a local-level coordinated system for inspections that responds to the applicant in reasonable time.

- Develop a day care sanitation code at the state level, in the Public Health Department, for centers and group homes.

- Be sure the building code classification as to type of use is appropriate for centers and group homes. Family day care should be considered a residential use, without additional requirements beyond those applied to family dwellings. Be sure the requirements themselves in building codes are reasonable for centers and group homes.

- Reduce red tape and paper requirements as much as possible. For centers, consider abolishing license renewal, substituting annual updating of all center records, which would be available for inspection.

Fiscal monitoring. The system for fiscal monitoring could be upgraded:

- Train the same staff to inspect both for licensing and funding requirements and to understand the rights and relationships under these very different forms of regulation.

- Overhaul the rate-setting process. Be sure the relation is clear between rates of reimbursement and the cost of providing care that meets requirements. If the state is not paying the full monetized cost of care, it should clearly know what proportion of the cost it is paying, so that providers can seek local or other funds.

- Experiment with evaluation systems and rating systems in the funded system. Competition for higher ratings might be encouraged. Output measures might be used in addition to the input measures now used.

Improving day care provision. Day care provision could be improved through these steps:

- Create a Child Care Specialist credential, which would be above the regular classroom caregiver level and granted by the licensing agency; permit clear mobility upward from entry-level roles, through both college training and required in-service competency-based training.

- Require day care directors to have experience as classroom staff or to employ Child Care Specialists in supervisory and training roles. Require directors to have skills and knowledge for managing an organization.

- Develop training and technical assistance at the local level, with emphasis on sharing of resources in the day care system and the community and with a strong voice for participants in the training and in identifying training needs. Require ongoing training in licensing requirements; provide training credit for conferences and workshops at professional meetings.

- Permit the funding agency for day care to buy training from Head Start training programs; Head Start training could likewise purchase training from organized day care training efforts.

- Make available, through the licensing agency, a consultant list for needs beyond the consultation relating to requirements; try to set up a fund to help pay for consultation if programs cannot afford it.

- Offer a voluntary credential for family day care providers; pay a higher state reimbursement rate for family day care by a caregiver with the credential.

- Develop a relationship between licensing staff, funding staff, and staff of any organization accrediting model programs.

Quality Seen in Context

In looking at the issue of quality, it is important to remember that it is only one of the day care policy issues. Trying to improve one aspect of policy out of context will probably make things worse. We have to address three important day care issues simultaneously because they are so entangled with one another: quality, staff wages, and affordability to parents. To improve only one or two of these aspects turns the others into a disaster. Improving quality would often mean adding more staff. If we get the staffing the way we want it and try to keep affordability, the result is even lower wages. If we get the wages the way we want them and try to keep affordability, quality will plummet. If we get the quality and wages we want, parents will not be able to use the service because it will not be

affordable. If government is the purchaser, fewer children will be served for the same public appropriation. Any effort to work on quality has to include a balanced effort to address all three of these intertwined issues.

It would require political skill and strategy to bring about any of the regulatory reforms just outlined. Among the policymakers in the current national administration, a climate of deregulation has eroded a federal leadership role and is undermining vigorous action at the state level. Child development specialists will need more knowledge about this political climate if they are to be effective.

Although government regulation is not the only approach, or even the best approach, to quality, it is a necessary part of the overall day care system. The law is a blunt instrument for achieving the fragile values in our quest for quality.

Those who want to make day care better need to ask not, What should the standards be?, but the more important questions: What aspects of day care are best regulated by government, and what aspects are best left in the hands of parents and staff? What mix of regulatory and nonregulatory actions will best protect children from harm and result in improved quality?

In asking these questions, we should always be clear about the effects of any one policy action on the child day care system as a whole. We should examine our actions to improve quality in a context that addresses affordability and wages as limitations on the power of each governmental form of regulation to bring about change.

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A DEVELOPMENTAL PERSPECTIVE ON PRACTICE

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Even prior to Head Start, most of us in early childhood education were committed to high quality education. We taught the relatively small number of adults in training and we provided education for a relatively small number of children. In the past 20 years the whirlwind of activities and the astonishingly rapid expansion of our field have thrust our profession into the limelight. What we knew about quality was challenged by colleagues from related fields, and we worked hard to explicate what had been implicit or, we thought, self-explanatory.

The tremendous pressures to meet the personnel needs of the mushrooming Head Start programs and Title XX day care centers resulted often in less-than-optimal quality, and we had the uneasy feeling that we were doing the best we could, but it did not seem good enough. Now private providers and proprietary centers are rushing in to fill the gap in services created by cutbacks in federally funded programs and by the large number of women entering or returning to the work force and requiring care for their children. We are again painfully aware of the lack of good quality care and concerned about what this means for our children's development. We recognize our obligation as a profession to speak out from a consolidated position of strength about what we unequivocally know to constitute high quality education and what we know about the ways to insure its delivery to young children.

As background for this paper, I want to emphasize that early childhood programs no longer deal only with children aged 3 to 8. They now include infant and toddler centers; nursery schools; day care centers and family day care homes for children from birth to school age; and, of course, private and public kindergartens. In this presentation, I am working on the assumption that all children are being educated, in any program they attend, and therefore should be included in a discussion of early childhood education. Whether they are learning what we want them to learn we cannot be sure, but we <u>can</u> be sure that they are adapting to the conditions provided for their care and in that sense are learning for better or worse. Let us now address some of the specific questions raised by the High/Scope staff.

Is Quality Just Trial and Error?

Before enlivening this presentation with some clinical vignettes that illustrate the everyday experience of children in early childhood centers, I first want to challenge the premise that the common sense approach to early childhood seems to be working. Our field has been extremely vulnerable to the idea that anyone can work with children—after all, we all were children, or we have had our own children, or we know well our neighborhood and relatives' children. I suggest that we follow a similar premise—we all

live in some kind of a building, we may even own our own homes, but this intimate acquaintanceship common to all of us does not qualify us to be architects. My point is that education of young children calls for highly trained professionals who have not only an aptitude for but also a commitment to educating themselves as well as the children whom they teach. We can indeed codify or measure good early childhood practices, and these spring not only from common sense but also from a solid theoretical base with supervised practical experiences. We should no longer view ourselves as a paraprofessional field aimed at providing jobs for adults (the poor, the aged) but should recognize that we have come of age as a profession with all these hallmarks of a profession:

—A research-based body of knowledge

—Professional journals to disseminate knowledge

—Professional organizations to share experience and knowledge

—Readily available professional education at the college and university level

—Career ladders within the profession

Secondly, we do not need to rediscover by trial and error what works with children. We have our developmental and educational theorists to generate research in tandem with the practitioners, who oftentimes know what works but also want to know what works best. And we now have the research that shows what contributes to quality and what can happen when poor quality prevails in early childhood programs. Our systematic observations as practitioners can continue to spark the research that will guide the practices so necessary to improve quality in early childhood education.

It is possible to codify and measure the quality of early childhood practices in the following ways: by sharing our observations about puzzling, unusual, or intriguing behavior with colleagues in weekly staff meetings; by raising curricular and developmental issues that merit further investigation with graduate students who are looking for research problems or with researchers eager to do collaborative work with early childhood centers; by making use of available consultants or supervisors through case conferences designed to learn more about one child's development—this knowledge can be generalized to the development of other children. Bruner (1980) describes one arm of the Oxfordshire research project in which teachers were asked to record on a concealed recorder 15 or 20 minutes of their interaction with children. These recordings were then transcribed and coded by a research team, one of whom later discussed with the teacher the transcript and the coding and filled in the gaps between what actually went on and what were the teacher's intentions. The results of this study are reported in Wood, McMahon, and Cranstoun (1980). Such an approach holds great promise for getting teachers to become more aware and introspective about what they are doing in the classroom. It allows them to make decisions that are not based solely on common sense and memories of past experiences, which may often be vague or distorted.

Three Everyday Examples

Eighteen-month-old Joey attends a local learning center from 7 a.m. to 6 p.m. daily. He arrives at the center with donut crumbs on his face and is yawning and often tearful on saying goodbye to his mother or father, especially now that the summer staff has been replaced by a new group of teachers. His brother attends the same center but is in a different class, since the children are segregated by age. The teacher notes that Joey is usually quiet, even withdrawn, except for the occasional times when he spies his brother in the hall and runs to embrace him or when he cuddles up to a new young teacher to whom he seems to be attached and to whom he clings if permitted. Joey pays little attention to his peers, except for an occasional bout of biting, which he is disciplined for by being put in the "time out" highchair. This doesn't seem to stop him, says his teacher, for he usually falls asleep in that chair. "Time out is no use." Except for his biting forays, Joey is docile, demands little attention, and "seems lost in the crowd." He only cries hard when one of his parents arrives to pick him up. His tears then are greeted with exasperation and no little puzzlement by his exhausted parents, who face an evening with two tired, hungry little boys. Joey's mother hasn't had time to tell the teacher that he has been waking nightly for several weeks, screaming and shaking with terror and begging to be taken into his parents' bed, a demand they sometimes accede to in order to get a decent night's sleep.

Four-year-old Cathy spends her extended day at a local day care center. When she arrives at 7:30 a.m., the male teacher (her favorite) greets her with a free lap and a mutual conversation about the toy koala bear she carries. Cathy's best friend, April, age 3 1/2, whom she has played with in the neighborhood for a year, arrives at 8 a.m., and the two girls exchange hugs and gravitate toward the housekeeping corner, where they engage in an ongoing game of mother/baby horse, alternating roles. Cathy chooses the breakfast table of her favorite teacher (who was her teacher last year, as well). He and the children discuss yesterday's trip to the local bakery. While she protests mildly at the morning rest period and loudly at the afternoon nap time, Cathy settles down both times with thumb in mouth and with her other hand on the knee of her teacher, seated nearby. She participates freely during free time in long bouts of dramatic play; paints several easel pictures to take home; pouts at story time when she can't pick the daily story; then recuperates in time to join the dancing, flushing with triumph at getting one of the boys to be her partner. Outdoors she is active and works out a spat with April concerning who is to ride the favorite red school tricycle. She ends her day by competently completing several wooden puzzles and playing several rounds of Candyland with her teacher and April. When her father picks her up at 5 p.m., she is heavy-lidded and somewhat whiney, but eager to show him a painting her teacher has placed at her eye-level, right inside the front door. Her parents report that she chatters endlessly about "my school" and "my Mr. Anderson."

Three-year-old Matt attends a long-established neighborhood nursery in a predominantly working-class neighborhood. The nursery has recently undergone new sponsorship, and the new director is eager to make her mark as an efficient administrator who "runs a tight ship." The center is bright, clean, and orderly, with adult art papering the bulletin boards, which are at adult eye-level. The children too are orderly, quiet, and even a little

subdued, with the explicit understanding that there is to be no fighting either with each other or indirectly with miniature life toys, no superhero play, and no running within the building. There is a place for every toy, and toys are to be used in specified ways; for example, puzzles and manipulative toys are to be used only at the table nearest the shelves where the toys are kept. A visitor to Matt's center notices the quietness of the building when she drops by at 10:30 a.m. to supervise a college student. The silence is broken by a faint wail that grows louder as a small 3-year-old and her shamefaced mother leave the classroom with an admonishing farewell from the teacher, "Perhaps you can stay longer tomorrow, Sally, if you don't cry." The visitor is greeted by the center director, who ushers her into the classroom with a proud statement about how orderly and well behaved the children are. In Matt's room, the visitor notes that Matt is sitting in the block corner, aimlessly running a little car back and forth over a block. Another little boy places his car on the block and the two vehicles collide. Matt's face brightens, he runs his car into the other child's, and both boys give a shout of delight. The teacher stiffens, the room grows more silent, and the other children watch with wide eyes as she moves to the block area and says kindly but firmly, "Matt, you know the rule. No hitting with cars." Matt slumps back to his former position and begins to run the car back and forth again over the block. The director smiles approvingly at the teacher and the boys, and one little girl says softly to her friend, "Matt's a bad boy!" After an hour's observation, the visitor is struck with the number of children who are claiming to be cold and wrapping the student teacher's arms around their shivering bodies; to her the room seems rather warm. Then she realizes that this is the only time the children have any close contact with any member of the teaching staff.

I have deliberately drawn examples from early childhood centers that by some standards would be considered good, rather than citing the hair-raising examples we are all familiar with--children in custodial care with little space, punitive adults, broken equipment, slipshod housekeeping, programs that stress academics for babies, and so on. Such conditions are readily detectable, and we would all be in agreement that they are indeed harmful to children and should be shut down. But how can we determine the more subtle points of good versus poor quality? I suggest that we look at the children in these programs and see how the quality affects their development.

What is impressive in looking at the centers of the three children I have described is the adaptability of the youngsters. Eighteen-month-old Joey has adapted to his "learning center," which he attends for 55 hours of the week--a longer time than either of his parents spends on the job. But at what price? Three-year-old Matt is indeed the compliant, subdued little boy his nursery school expects the children to be, but again, at what price? All of us in early childhood education are well versed in Bloom's (1964) often-cited statistic that 50 percent of a child's final intelligence and 33 percent of his or her performance on school achievement tests are predictable from measures of intelligence before entering grade school. Are we equally cognizant of the critical periods in emotional development? Look at the emotional toll being taken on an 18-month-old who is becoming withdrawn, passive, and apathetic in the face of what may be intolerable demands, such as being away from home for 11 out of the 24 hours of his day, with well-meaning but ever-changing caregivers.

With these clinical examples as a background, let us turn to what we as practitioners know constitutes high quality early childhood education. If we consider Joey, the 18-month-old, or Cathy, the lively, self-directed 4-year-old, we note what personality characteristics distinguish each child, what flags concern for Joey and pleasure in Cathy. High quality education makes it possible for Cathy to be self-directed; to be in tune with her own feelings and those of others, with a wide range of emotions; to be securely attached to parents and teachers; yet to be appropriately independent, with a lively curiosity, an eagerness to learn, and ability to use her ideas creatively. These are all qualities we want to see in our children. While we cannot credit her preschool totally, we can see how her teachers facilitate her optimal development, just as we can determine to a certain extent what is missing from Joey's center that is undermining his personality at a crucial point in his development. Further, we can see in Matt's center what is present that is actively cultivating personality traits that please the teacher and perhaps his parents, but that concern those of us who have knowledge of developmental norms.

Quality and the Practitioner

There can be no doubt of the importance of adults to very young children. If one were to choose the single most important aspect of an early childhood program, adults would win the vote without question. It is the teacher/caregiver whose philosophy determines the environment and the curriculum. It is the teacher who decides how much contact she or he will have with parents and who sets the tone for the everyday life of the children. Children, as young of the most developed of living species, have the longest period of childhood during which they are dependent on adults for nurturance, support, learning, and survival itself. We know the importance of the parent/infant bond from the beginning of life, and we are learning more and more about the importance of a strong parent/child attachment. This attachment insures the gradually unfolding separation-individuation process, which results in the child's achieving, during the first three years of life, a lasting sense of self-constancy and an abiding sense of the constancy of others.

Consider the example of Joey, the 18-month-old, who is at the developmentally appropriate phase to be struggling with issues of psychic separation and autonomy and is also at the transition time between the sensorimotor period of intelligence and the preoperational period. At this time in development, two essential symbol systems are emerging—speech and symbolic play. For these symbolic functions, the child needs the nourishment that comes from the consistent contact of a caring, meaningful adult. Joey's teachers are caring people, but they shift and change, with no one adult invested in his development to the extent that his parents are. His parents do care very much, but have little energy left at the end of the day to engage in the meaningful interchanges necessary to foster optimal symbolic growth. Further, because of his growing cognitive capacities and growing self-awareness, Joey is especially vulnerable to separation. He needs adults to help him through the daily rough spots—the transition from home to school, from lunchtime to nap, from one school play activity to another, and back home again. A knowledgeable teacher could foster Joey's

growth toward autonomy and a firm sense of self at this time, but the system of unstable staffing prevents this, with resultant danger signs of apathy, withdrawal, and passivity.

Further, we know the value of adults for modeling playfulness, task concentration and completion, expressions and handling of feelings, modes of relating to others, and the myriad other aspects of adults that children identify with, especially in the adults who have great meaning to them. Matt has learned at age 3 that good boys do not shout, are not aggressive, are clean and neat, and do not cry when mother leaves. The sense of badness that gets engendered when he either acts out or even feels these normal aggressive impulses is exacerbated by knowing that his beloved teacher will not approve. Both Matt and Joey are showing signs of maladaptive behavior in their very adaptation to poor quality teaching that does not recognize their developmental needs. The importance of teachers recognizing and working with feelings cannot be discounted. The normal feelings of childhood--love, hate, jealousy, fear, pleasure, anger, willfulness, for example—must be respected by caring adults and their expression must be accepted and absorbed by the adult when the child cannot handle the intensity of these feelings.

Joey's biting is only one symptom of his inability to handle the feelings of loss, fear, rage, and despair around separation; being placed in the "time out" chair leaves him alone and overwhelmed. He retreats into sleep. Matt's aggressive impulses get nipped in the bud by the teacher and he retreats into empty play, feeling ashamed and quietly angry. The caring adult transmits his or her confidence that the children eventually will be able to express and control their feelings in ways acceptable to themselves and to others (adults and other children) who mean so much to them. In the meantime, the adult will model that feelings are important and that there are ways to manage them.

Turning now to the good quality day care center in which Cathy is enrolled, we learn that her teachers are well trained in a reputable child development program that intertwines theory, research, practice, and programming. The teachers understand the importance of finely honed empathy that arises from the understanding of cognitive-affective development. Inservice education opportunities allow them to refuel when they find their teaching growing stale, and good supervision enables them to sort out their ideas and feelings with another understanding and knowledgeable adult when they find themselves too close to a problem or concern to deal with it objectively.

In Cathy's classroom she is valued as an individual with needs, interests, and capacities, which the teachers choose to foster through an individualized program built on their knowledge of her developmental readiness. They are prepared to recognize and help channel the children's feelings, to provide direct and indirect learning experiences, to facilitate play, to foster autonomy but provide nurturance and meet needs for dependence when appropriate. Above all, they see their roles as supplementary to the home. They make sure Cathy's parents know what happened during her school day; they take time to hear her parents' concerns when they arise. Further, they encourage the relationships between children, for a good teacher knows how much teaching goes on between children—how one child, amazed at the different style and daring of another

child, models him/herself after the other. Through their shared puzzlement, shared experiences, and shared views of a newly emerging, mystifying world, children can understand and communicate with each other at a level of empathy beyond the adult's reach. But it takes an aware adult to mediate, facilitate, guide, and occasionally ignore this learning between children, in order for it to proceed in constructive, expanding ways.

Quality and the Environment

The physical environment tells us a great deal about the school's philosophy. On entering an early childhood center, we are immediately aware of how adults value the children and themselves. It is easy to evaluate a poor environment--the broken toys, a haphazard arrangement of equipment, dirty sinks and smelly toilets, unkempt shelves and lockers, torn books, and in general an air of neglect and hopelessness. There are important, sometimes subtle, differences in centers, and these make the differences for children. The environment gives a message to adults and children alike. Matt's center, which is pleasant and welcoming to the adult, is maintained with an eye to order and cleanliness, both laudable standards. However, when these standards are generalized to all aspects of children's behaviors, then we know that the teachers are putting their adult needs for control and order before the child's need to experiment, to try out various ways of using materials, to occasionally glory in play with fluid and plastic materials (in spite of their messiness), and to have a sense that this is their school as well as the teachers'. The placement of both toys and pictures tells us a great deal about whom the rooms are for; pictures at the eye-level of adults are pleasing to the adult but rarely can be seen by children. The selection of adult versus children's art tells us whose products are valued most.

We know that overcrowded, messy classrooms with too many children and too few adults lead to disorganized messy play and aimless rushing about. Well-planned environments with an adequate adult/child ratio are conducive to constructive learning processes, including rich dramatic play episodes. In his recent book that reviews and evaluates services for children under age 5 in Britain, specifically in Oxfordshire, Bruner (1980, pp. 72-73) concludes from his research that smaller, well-staffed centers encourage more conversation and promote more dramatic play than do the larger, shorter-staffed centers. He concludes, "To review in homely terms, some prescribed educational activities during the day raise the level of play, so does generous ratio of staff to children, and perhaps best of all is small size. Structure, intimacy, and staffing ratio seem, in the main, to matter more than whether a place is called a playgroup, a nursery class, or a nursery school."

In sum, the environment of a high quality center reflects the philosophy of the teachers, since they are the ones who make the decisions about room arrangements, selection of materials, and programming. A program with quality has rooms arranged for the convenience, visibility, and accessibility of the children. Areas are well defined, so that ongoing play does not get disrupted and children can pursue their individual and group interests without unnecessary interruption. Materials are selected to appeal to specific ages and to lend themselves to the symbolization of the

children's experience. A knowledge of the varying developmental needs of children leads us to supply duplicate toys for younger children who cannot yet share and postpone, unstructured toys that will give scope to imagination and improvization, structured toys that are self-correcting and lead to a sense of efficacy, and, above all, the teacher's permission and encouragement for the creative uses of the materials in a multiplicity of ways (Curry & Arnaud, 1984).

The programming, of course, has a built-in curriculum that has a solid theoretical base and a staff who are open to learn more about themselves, the children they are teaching, and early childhood education.

Quality and Espousing a Theory

By now it should be clear how strongly I feel that high quality early childhood programs should espouse a philosophy--a set of guiding principles for the education of young children that is based in theory and research. Further, it is undoubtedly clear that my approach in considering the foregoing issues comes from a philosophical stance. Before clarifying that stance further, I want to recognize with you that our profession has come of age through the careful, thoughtful implementation of various philosophical positions based on various theories--maturation, behavioral/environmental, and cognitive/developmental (Kohlberg, 1968). Further, each of these theoretical positions as implemented through experimental programs has had some payoff for the children, as evidenced in the report of the results of the planned variations in Follow Through (Stallings, 1975). It appears that a well-thought-out program, with its clear theoretical focus and sense of purpose, will have many of the attributes of program quality mentioned earlier: trained and committed staff, carefully considered programming and environmental design, evaluation of the program as evidenced by the children's progress. Whether we totally agree with a program's philosophy or not, there is comfort in knowing that the teachers have made a commitment to a philosophy and have a rationale for what they do that is backed by research and tested practice.

In the examples cited earlier, Joey's center does not appear to be operating under theoretically based guiding principles, other than those involving the health, safety, and perhaps nutrition of the children. The staff are well meaning, operate on a day-to-day basis, have little investment in furthering their knowledge, and see their primary purpose as providing safe day care for profit under the label of a "learning center." Matt's center has a philosophy with no apparent theoretical base. The guiding principle seems to be that of adult control and child obedience, and the staff work toward that goal assiduously. This pays off for them and reinforces their philosophy, for they are getting the kind of behavior they want from the children; their center is quiet and orderly. Other centers you are all familiar with are going "back to basics," introducing letters and numbers earlier and earlier to very young children. This theoretical stance has no solid base or research to show what ultimate payoff this has for children.

Cathy's day care center implements a philosophy that is close to my position. The environment of her school encourages each child to be an

active partner in the learning process--the actor, the doer, the initiator. The curriculum is determined by the children, each of whom is seen as an individual with a unique basic constitutional endowment that has been and continues to be influenced by the child's social and cultural environment. The adult does not abdicate his or her responsibility for building on the children's ideas and for providing the nutriment for further learning that challenges the children to reach out for new experiences that may have been outside their awareness. In Cathy's school, children's needs, interests, and developmental capacities determine the program content, the room arrangement, and the way the daily activities are devised. The teachers know of the importance of pacing: children are challenged by enough novelty to be intrigued but not by so much that they must tune out. The teachers see themselves as facilitators and are readily available to help the children succeed in the learning process. They do not dominate the activities or the children, and they consider that the classroom and the activities belong to both the children and the teachers.

For example, Cathy's interest in horses is acknowledged by her teachers and encouraged by the introduction of pictures, puzzles, books, and an occasional song. When she builds a corral with blocks, they respect her wish to keep it up overnight for a continuation of her horse play the next day, but they do not develop a unit on horses for the entire class, since this appears to be Cathy's unique interest.

Such a philosophy cannot be implemented solely through the teachers' common sense and intuition. The teachers need a thorough grounding in the following:

1. The principles governing growth and development of all human beings--such as the gestalt notions of the progression from global diffuseness, to differentiation, to organization and integration; Margaret Mahler's theories of separation and individuation; Piaget's concepts of assimilation and accommodation; and Erikson's psychosocial changes

2. The slow and continuing accumulation of knowledge and disputation concerning the best ways of educating the young child--which has its roots in the philosophies of John Locke, Jean Henri Pestalozzi, J. J. Rousseau, Frederich Froebel, John Dewey, and Maria Montessori

3. The factors in the short life-history of the child that influence his present behavior (what children have in common; how and why they differ from each other)

Implementing this philosophical approach involves accepting the child's intense urge to play. In addition to play being the characteristic way most children encounter their worlds, it serves an essential function in furthering the child's developing symbolic functions. As the child moves from the sensorimotor period to the preoperational mode of thought characteristic of the later preschool years, an elaborate system of symbolization develops in the second year of life. Both receptive and expressive language capacities grow, so that the child can indicate needs, wishes, and feelings symbolically, rather than having to act them out directly. Further differentiation of self from others is made possible by

language--the child creates the words; sees that other people, objects, and things have labels; and can use these labels in a common symbolic system. Using this common system makes the child a part of the world at the same time the child is finding that he or she exists separately in that world. We are seriously concerned for Joey, who is not getting the opportunity to realize this potential. His signals are not being heard. Consequently, he may be stunted in his development of the capacity to symbolize, which assists the child in becoming autonomous, efficient in learning, and effective in the environment.

One expects a 3-year-old to begin to use dramatic play as an integrative function in the symbolic process. In rudimentary dramatic play, the child depicts what has been observed or experienced and, in the process, symbolizes both external and internal reality. To be able to play-act an event (pretending one drives home from work, like mommy) or to replicate in play a real emotion (pretending to be sad) is a further step in abstraction. Matt, through the inhibition of his normal aggressive drive, does not seem to have the energy to engage in the zestful play most 3-year-olds enjoy. In his efforts to control himself and be the docile child his teacher values, he does not use play to learn about his world and his place in it. His desultory attempts at play tell us instead how he feels about himself in his world--helpless and ineffectual.

Cathy, on the other hand, uses play meaningfully and is furthering her social, emotional, physical, and intellectual growth through play. Her dramatic play has a discernible beginning, middle, and end, and she has the ability to sustain her roles as mother/baby/daddy horse even when she gets distracted. Her interest in horses leads her to seek out the available stimuli about these animals, and at age 4 she is a walking encyclopedia about the various breeds of horses, just as her classmate Jim knows all about dinosaurs. Her capacity to keep her younger friend April involved in the extended horse episodes tells us of her ability to see things from another's point of view, for she will adapt, shift, and accommodate to April's wishes for the sake of sustaining play. Further, she has captured the essence of the horse's movements, for she can canter down the halls in an uncanny imitation of a real horse. From her play capacities, she demonstrates conservation, reversibility, problem solving, creativity, and playfulness--all attributes essential to learning. The emotional investment in such play tells us of its importance to this little girl, and her teachers understand it in the context of what they know of her family life and what she is struggling with developmentally. Since she swings flexibly between the nurturing and aggressive aspects in her portrayal of the role, can maintain a distinction between real and pretend, and has a flexible array of other self representations, teachers feel comfortable in facilitating her play through the provision of time, space, materials, and their approval of her and her playmates' role-playing abilities.

Such an appreciation of children's play could make the difference for Joey and Matt in their school setting, but it does not happen; they are cut off from a self-expressive avenue that could aid in their adjustments to both home and school realities. Our concern is, of course, for their emotional development; but without the opportunity to symbolize, integrate, and synthesize their internal and external realities, their intellectual growth is becoming stunted as well.

Summary

The quality of our children's education can make a difference in their lives. We have the means and responsibility to define and implement high quality in early childhood education. The theoretical orientation of the centers, the curriculum, and the environment all play a strong part in the assurance of high quality, but it is the people, young and old, who really make the difference. Children deserve the best teachers we can provide--teachers well trained in child development and early childhood methodologies and with a capacity for nurturance, empathy, and deep respect for the developing human beings in their care.

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THE PARENT-CONSUMER PERSPECTIVE ON QUALITY

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Perhaps each reader of this article accepts the view that parents can and should contribute to the enhancement of the quality of day care. Yet, unfortunately, the fight for better day care in this country has centered on elements in the day care system other than parent involvement (e.g., staff training, licensing). Even the subject of parent involvement after a child has entered a day care program, which has a secure base of support, remains largely unexploited by researchers, program developers, and practitioners.

But what about parent involvement before choosing a day care program? After all, a child does not enroll in a particular high quality day care program unless his or her parents choose it. In most instances and for most families, there are options from among equally affordable and accessible programs that do (and probably always will) vary in quality. Therefore we believe that one of the prime yet overlooked tasks for family and day care professionals is to reach parents with information and tools for selecting day care. This effort should bring the pressures of informed choice into the day care marketplace as well as into the sociopolitical debates about meeting parents' child care needs in the eighties.

In the interest of pursuing the role of parents as day care consumers, we have embarked on a study of the processes that parents go through as they choose day care, the criteria they use, and the characteristics of those parents who are apparently more successful than others in finding good programs. We also have attempted to establish that parents can become more effective and discriminating day care consumers by having information available that will improve their day care selection activities. Our findings must be viewed as preliminary because, after all, few have attempted to explore this area, and our results are limited to the kinds of families (mostly middle-class) and kind of day care (proprietary) which we have had access to. While we suspect that many of the factors uncovered by our research thus far will generalize to other populations and programs, we will not know the extent of the generalizability until further research has been done. However, in the meantime, we think our preliminary knowledge should encourage family and day care professionals to move beyond platitudes about the importance of parent involvement and begin to consider more seriously the potential gains that could be made in day care by working with (as well as for) parents.

How Do Parents Choose Day Care?

Although this question can be approached from different angles, our research grew from the alarm generated in us by the rather casual comments of the first few parents we interviewed. We recall the wife of a military officer who said she simply chose a center by opening the Yellow Pages, closing her eyes, and "letting her fingers do the walking." Where her

fingers stopped was where she called and subsequently enrolled her child. Similarly, we recall the college professor who stated that his choice was based on his eyes being open at the right time--that is, he saw the center as he passed it every day on his way to work. His choice apparently gave no consideration to the fact that four or five other centers were within five minutes driving time. Perhaps more important, one of these centers may have been superior to and less costly than the one he chose.

Our early alarm gave way to a more balanced view. In phone interviews with 86 parents, we found only one who used the Yellow Pages "roulette approach" to selecting day care. Still, the evidence indicated that few parents were well informed or very systematic in their search. For example, nearly 10 percent said they had made their choice without first visiting the centers in which they ultimately enrolled their children. Of the remainder, who did visit the centers first, only one third also had visited other programs to "comparison-shop." Further, while from the total group of parents we generated a long list of appropriate things they claimed to have done while visiting the centers (e.g., observing children, caregivers, toys; asking questions about meals, discipline), only two things were listed, on average, per parent. As a result, important considerations and procedures were overlooked by many parents. For example, only about two thirds of the parents stated that they talked to the directors, and only about one third said they observed the children.

We had deliberately selected a group of well-educated parents (mostly college graduates) whose children were attending programs judged by local experts to be at least average or above in quality. We assumed that our results would therefore provide a conservative estimate of parents' superficiality, randomness, and lack of concern with the day care selection process. But these parents were clearly concerned about quality, even if they were not sure about how to evaluate it. For instance, most said they would have greatly appreciated having more information and listed their most important considerations in choosing a program as the program's educational benefits and the competencies of the staff. These parents were at least concerned about and aware of the importance of a good program; what they lacked was information on how to distinguish good programs from others. (For more information about the research just summarized, the reader is invited to read Bradbard, Endsley, & Readdick, 1983, available from the authors on request.)

Which Parents Are Successful in Selecting High Quality Day Care?

While it became clear to us that parents need more information about how to choose quality in day care, we were also interested in the state of affairs of the more typical parent. What is it about these parents that leads some of them to choose a higher quality program and others a lower quality program? We obtained both demographic information and information on the day care selection process from a set of 257 parents whose children attended any one of 18 proprietary day care centers located in four Southeastern communities (three small college towns and one small mill town). The parents generally had a high school education, and their average educational attainment was two years beyond high school. As before, the quality of the centers had been independently assessed by local day care

experts—day care professionals who were very familiar with the programs but were not aware of the purpose of our study. Using a 9-point rating scale supplemented by an observation guide, the experts rated the programs as ranging from 2.5 points (e.g., licensed but providing minimal custodial care) to 7.5 points (e.g., developmentally based program lacking only comprehensive services and ideal child-caregiver ratios), with most judged to fall between 4 and 6 points (slightly below to slightly above average).

In general, the results supported the role and value of parents having information and exhibiting care in deliberating over this information. For example, those who chose higher quality programs had read more about day care and had been more likely to talk to professionals and get their advice (although few were able to do this). Even though the well-educated parents in the preceding study did not appear very systematic, it was noteworthy that in this second study, the best single predictor of choosing quality in day care was the parents' educational level, particularly the educational level of the husband. However, job status, which along with education forms the other half of the conventional index of socioeconomic status (SES), was much less predictive than education. Further, education and job status combined were a less reliable predictor of choosing quality in day care.

Possibly educational level reflected the parents' thoughtfulness and skills for getting access to information (i.e., reading about day care or contacting professionals). Even more likely, it was a reflection of the parents' value systems—that is, whether they valued education. Parents with a high level of education generally value education and consequently could be interested in one of the main components defining high quality day care—the educational component. This could lead to their more consistent selection of quality in programs.

We should be clear that the link between good day care choices and parents' educational level was not a social status phenomenon. That is, parents who were better educated did not live on the "right side of town" and consequently enroll their children in a better center near their homes; nor did parents who were less educated live on the "wrong side of town" and enroll their children in poorer centers in their part of town. Education was not an index of family income that led more educated parents (and parents who earn more money) to the programs that also cost more. In our sample there was no correlation between day care center quality and location or cost. In fact, there was little variation in cost in our sample ($27-34 per week per child in 1980 dollars).

After the appropriate statistical adjustments were made, there were four other factors in addition to parents' education that emerged as independent and significant predictors of parents' selecting quality day care. These were (a) dissatisfaction with previous child care arrangements; (b) wives and husbands discussing the day care decision together; (c) choosing centers based on their location (a negative predictor); and (d) size of family (also a negative predictor). Briefly, if parents had previous experiences of dissatisfaction with child care, they were more likely to choose a higher quality center. Apparently, just having a previous child care arrangement wasn't enough—it had to be one in which the parents had some problems and dissatisfaction, resulting in a more careful search by them the next time.

Also, when husbands and wives discussed the day care decision together (85 percent were currently married), better choices of a center (i.e., the center was rated better by experts) seemed to be forthcoming. As readers might expect, many mothers have the whole responsibility of the day care decision-making process, since the issue of day care is often assumed by fathers to be "her problem." About six of the ten mothers in our sample had discussed the issue with their spouses; the other four had not. We did not have the impression that the fathers who were involved in the decision had been active in seeking out information about local centers. Rather, we suspect that the importance of their consultation with their wives was in providing them with psychological support and in sharing commitment to the family decision that the wife would work and find quality day care as an acceptable solution to the resulting need for caregiving.

Of the two negative predictors, one was expected and one was not. We expected to find that parents who used the location of the center as a criterion in choosing day care (recall our college professor) would tend to make a poorer choice, and they did. It should be pointed out that in the communities we studied, no parent was more than 20 minutes away (and most were not more than 10 minutes away) from any day care center, so location should not have been an important criterion for these parents.

The unexpected finding was that the greater the number of children in a family, the less likely were those parents to choose a high quality program. This surprised us, since we assumed the more children, the more experience and expertise the parents might have had in choosing quality in child care arrangements. (Of course, recall our previous finding that past experience per se was not a significant predictor—only dissatisfaction with previous arrangements.) Two factors about this finding make it of more than passing interest: First, the parents in this study generally had small families (mean of 1.6 children). In fact, less than 10 percent had more than two children, and the five largest families had only four children. Yet, the effect was clearly significant and was due largely to the poorer choices made by parents with three or four children. Second, as indicated previously, because of the statistical controls imposed, the effects of family size were independent of the other factors already discussed. Thus, one cannot say, for instance, that the family-size effect was produced by other factors (e.g., that parents with less education or that parents who are less inclined to consult with their spouses about day care are the same ones who have larger families).

Our speculations concerning family size must be extremely tentative at this stage. However, it is possible that couples grow less involved with successive children and consequently become more casual about all aspects of parenting, including the aspect that involves managing out-of-home experiences (e.g., selecting doctors, music teachers, camps, and day care). There may be some general benefits of learning to relax while rearing successive children, as one's parenting skills are developed on the job. However, parents should not get too casual about managing out-of-home experiences, because continual and careful monitoring of these experiences and of the experts who run them are always important. (For other speculation about these findings and a more detailed account of this study, see Endsley, Bradbard, & Readdick, 1984.)

Helping Parents Choose High Quality Day Care

From the information we have just presented it should be clear that while parents often may be motivated to find the highest quality day care arrangement available to them and their children, they are often severely limited by a lack of knowledge and information to help them make the best day care decisions. In an effort to provide them with one source of information, we developed and field tested the Parent Guide to Quality Day Care Centers--a list of items that parents observe in a short 20- to 30-minute visit to a day care center (see Bradbard & Endsley, 1978 a,b,c). Briefly we went through three major steps in developing the Guide:

Step 1. Based on our review of the child development/day care literature, we generated a set of items consisting of characteristics parents should and could see when visiting a high quality day care center. These items included (a) health and safety features (e.g., electrical outlets are covered with safety caps); (b) adult-child and child-child interactions (e.g., adults are observed praising children, saying such things as "you did a good job putting away the toys"); (c) program activities (e.g., attractive and well-written story and picture books are available to the children); (d) home-center coordination (e.g., the center posts a sign encouraging parents or those involved in child care at home to visit the center at any time during the day); and (e) physical space (e.g., the center has an individual space, such as locker, drawer, cubbie, box, or coat hook, for each child to store belongings).

Eighteen day care/child development professionals, many with national reputations, examined our list of items, to determine whether they were clearly worded, reflected high quality, and could be observed in a center during a single 20- to 30-minute visit. Finally, a group of mothers examined the items for their clarity and potential for being observed in a short 20- to 30-minute visit to a center. This process resulted in a 65-item checklist.

Step 2. The second step involved field testing the Guide. Initially, a group of five local day care experts independently rated 12 licensed proprietary day care centers on a 9-point quality scale, where 1 point represented a "deplorable" program that should not be licensed; 5 points, an "average" program; and 9 points, a "superior" program with comprehensive services.[1] Reassuringly, the experts were in high agreement (mean correlation among the experts was .82) about the quality of each program; most programs were judged to be a point above or a point below the average score of 5.

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[1]It was illuminating for us to discover in a college community with literally scores of professionals in the fields of child development, early childhood education, and day care, that only five persons could be uncovered who not only had enough training but also had enough first-hand knowledge of the local programs to be able to evaluate them. Thus, we have concluded that truly informed professionals are not likely to be available to most parents in most communities.

Then 26 working and/or student women (white, with three years of college) were asked to visit 4 of the 12 centers: 2 centers somewhat below average and 2 centers somewhat above average (as judged by the local experts). Using the Guide, the women made some visits in pairs and returned to some centers a week later, thereby providing us with information on how consistent (reliable) the women would be with themselves and each other in what they saw in each center. The reliability of the instrument proved to be quite satisfactory—that is, all observer agreements exceeded 75 percent. But most important, their observations indicated that they saw substantially more positive Guide items in higher quality centers than in poorer quality centers.

Step 3. The final phase of Guide development and testing involved asking 28 working women (white, with 3 years of college) to visit the same centers. It should be pointed out that all these women were potential day care "consumers" (22 were already mothers). That is, they were actively seeking day care or said that they would be seeking day care in the future. Each woman rated the centers on the 9-point quality scale used by the local experts. However, only half of the women visited the centers with the Guide, while the other half went without the Guide. As expected, the results revealed that those women who had the Guide in hand when they visited the centers made judgments of quality that were very close to those of the experts. More important, they significantly differentiated the higher and lower quality groups of centers, while those who made judgments without the Guide did not, generally rating them all as average.

In sum, we were pleased to find that our sample of interested, reasonably well-educated mothers were able to distinguish between somewhat below-average and somewhat above-average proprietary day care centers simply by having available an easy-to-use list of items that professionals and other mothers judged to be characteristic of high quality day care. Since our initial field testing of the Guide, we have again tested it in another community, with very similar results (see Bradbard & Endsley, 1982). Further, the Guide (in somewhat revised form), the rationale for the items that form the Guide, and information on how parents can be involved in their children's day care program after the children are enrolled, were the basis for our book, Quality Day Care: A Handbook of Choices for Parents and Caregivers, published by Prentice-Hall (Spectrum) in 1981.

Helping Parents Help Themselves: Other Ways

We would like to close this paper with some suggestions for professionals in the day care field, suggestions that are straightforward implications of the results of our research:

Provide parents with do-it-yourself guides and reading materials. Our Guide is one of several available to parents today. One of the best can be obtained from the U.S. Department of Health and Human Services (1980). This guide, which is very similar to our own, seems to be a potentially valuable resource for parents, though we are not aware of whether it has been field tested to document its ability to discriminate levels of day care quality.

In any case, our research on the day care selection process has led us to believe that parents who simply read about day care select better quality programs. Thus, perhaps having any kind of day care guide or reading material in hand, as compared to having no resource material at all, may sensitize parents to the myriad things to consider in selecting a program. Yet we wonder how many professionals suggest guides, checklists, or reading materials to parents who ask for help in selecting day care.

In 1979 we surveyed state day care licensers about the kinds of information they provided parents who called asking for help with day care selection. Twenty-five percent of the licensers representing the 50 states and the District of Columbia said they either could not or did not suggest reading material to parents to help them make more informed day care decisions (see Bradbard & Endsley, 1979, for more information on this study). We think that day care professionals could offer a very valuable service to parents by having day care guides and reading materials available or suggesting specific sources where these materials could be obtained.

Build parents' knowledge and confidence. This brings us to another interesting point. Traditionally, licensers have viewed their role as maintaining a minimum standard of quality below which centers are not allowed to operate. Licensers in several states have challenged this viewpoint and have tried to develop standards that exceed the minimum and provide more help to parents who need information on how to select day care. Yet the more normal state of affairs is that most licensers (not to mention other professionals) still give parents who request information little more than a list of licensed centers in their locale. Occasionally, they may also provide a copy of the licensing standards, but these documents are often legalistic and difficult for the average parent to interpret; they typically concentrate on many health and safety details that extend beyond the interests of most parents. Consequently, many parents to whom we have spoken have been very frustrated by the "I can't tell you anything more" attitude of licensers.

We are not suggesting that licensers and other child care information and referral specialists tell parents which centers they think are the good ones or the bad ones, though this type of evaluative information is often provided (see Levine, 1982, for an excellent chapter on the kinds of information-dissemination dilemmas faced by child care information and referral services). On the contrary, we feel very strongly that parents should not depend heavily on the advice of others; rather, they should visit centers themselves, evaluate and weigh the information they obtain in those centers, and then make their own day care decision. The problem is that parents often do not have enough information to know that they should not listen solely to other peoples' second-hand (and often inaccurate) information but that they can (and should) read about day care, go to visit several centers, and comparison-shop with a checklist in hand. Licensers and other professionals need to take the time to explain to parents why they cannot tell them which centers are the best. Then they need to build parents' confidence, so they feel competent enough to make a systematic search of the available day care in their community.

Break down the day care search into smaller components. As professionals, we know that the day care selection process should involve many components, from the time parents decide to select a center until the time the child is actually enrolled. For example, they must decide whether part-time or full-time care is needed and whether the care is to be provided in a center, by a babysitter, or by a family day care provider. Further, parents must decide how much they can afford to pay for care, how many centers are located close enough to home to make them likely choices, and whether the quality of care provided in each arrangement is acceptable.

These day care selection components can all be broken down into smaller components. For example, we know that when parents visit a day care center, they should talk to the center director and as many caregivers as possible; ask specific questions about policies (e.g., insurance, meals, diaper service, discipline, educational philosophy, hours of operation); observe the general interactions of children and caregivers; observe activities and equipment, both indoors and outdoors; observe how and whether parent involvement takes place; and so on. In short, day care selection can look like a very complicated process to a parent unless that parent can be "walked through" the process verbally or with written materials. Since most parents are not aware of the various components that should be included in the day care selection process, we would like to encourage professionals who have contacts with parents to first ask questions that break down the day care selection process into smaller, less complicated components (e.g., What are the various types of child care available to you? How many centers are in your locale? How many of these centers offer full-day care?). Then professionals should point out to parents that each component and sub-component is important (e.g., when you visit centers, be sure to do all of the following: talk to the director, talk to all caregivers who will work with your child, observe child-child interactions, observe caregiver-child interactions, observe activities, etc.).

Make parents aware of variables that are related to choosing quality day care. Based on the findings of our research, we think professionals should explore with parents whether they have used previous child care arrangements, whether they were satisfied or dissatisfied with them, and the significance of their dissatisfaction as a predictor of selecting quality day care. Similarly, parents could be made aware that discussing the day care decision with a spouse or perhaps another person in their social network usually results in a better decision.

Next, professionals can warn parents that selecting day care based on location, cost, or other convenience factors may not lead them to select quality day care. Parents should know that within certain locales there may be several centers of similar quality and that the relative quality of these centers cannot always be predicted by their costs. This is particularly true in the case of middle-class parents who are often restricted to proprietary day care arrangements; these are precisely the programs in which quality levels are the most difficult to discriminate because they are often just below or just above average.

Finally, parents might be interested in knowing about our finding that those families with one or two children may be more likely to select better quality day care than families with three or four children. This finding, and our speculations about it, could have the effect of sensitizing parents with a greater number of children to the issue of not being too casual about selecting and managing their children's out-of-home day care experiences.

Conclusion

In effect, we are suggesting a compatible alternative to the types of advice that licensers and other information and referral specialists typically offer parents who are in the process of selecting child care (see Levine, 1982). It is neither adequate nor appropriate to simply provide parents with a list of licensed child care or a copy of licensing standards (as licensers generally do), or to tell parents which specific programs are good, average, or poor (as information and referral specialists sometimes do). Instead, we propose that professionals should educate parents about, and more fully involve parents in, the child care selection process by (a) providing them with easy-to-use guides and reading materials, (b) building their confidence so they feel competent enough to make a systematic search of the available child care, (c) breaking down the selection process into smaller components and "walking through" the process with parents either verbally or with written materials, and (d) making parents aware of the various family status and selection factors that may lead some parents to select better quality care than others. In short, we believe that child care professionals should take a more active part in helping parents better appreciate their role as the crucial link between their child's and family's needs and the delivery of high quality child care services.

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WHAT THE RESEARCH SAYS (AND DOESN'T SAY) ABOUT QUALITY

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Over the past two decades a considerable amount of research in early childhood education has been conducted. Out of this variety of investigations have come a number of statements concerning the issue of quality. How do we define quality? What are the basic indicators of quality? What are the effects of quality on children's development? These questions have been addressed by researchers from a variety of philosophical, theoretical, and methodological perspectives.

From the perspective of research, how we define quality in early childhood education depends largely on the paradigmatic stance we take. This is not to suggest that we take an either-or position. What needs to be recognized, however, is that the field of early childhood education research has been dominated by quantitative approaches to the definition of quality.

Findings from Quantitative Research

In spite of its focus on verification of preconceived notions, quantitative research offers us much in the way of defining quality in early childhood education. Recent large-scale studies have solicited considerable input from practitioners as well as from those offering a qualitative perspective. The National Day Care Study (Ruopp, Travers, Glantz, & Coelen, 1979) is one such example. The National Day Care Study (NDCS) based its measurement of quality on three premises:

> First, the welfare of the individual child and of children collectively must be central to any discussion of quality....Second, it is not enough to protect children from obvious forms of harm, such as malnutrition, accidents, and communicable diseases....Quality programs must, by definition, actively promote healthy and normal social, emotional, and cognitive development....Third, judgments of quality must rest on direct assessment of the child's daily experience and its developmental impact. (pp. 63-64)

The NDCS utilized three types of instruments in attempting to address the question of quality child care: (1) an observation system that focused on the caregiver behavior, (2) an observation system that focused on child behavior, and (3) a battery of standardized tests. What distinguished the NDCS from many of its quantitative predecessors was its conscious efforts not to rely heavily on preconceived notions. Ruopp et al. (1979) stated this, for example:

> ...it was not decided in advance that the praising of children by caregivers is an unqualified good, and that more praise invariably makes for a better classroom. Rather, it was discovered empirically that praising was part of a cluster of caregiver behaviors that tended

to occur together (comforting, responding, instructing, and questioning were among the others) and that also were associated with active participation and high test score gains on the part of children. (p. 65)

The NDCS findings, according to Ruopp et al. (1979), show that "certain regulatable center characteristics are consistently associated with measures of day care quality" (p. 77). These findings are summarized in Figure 1. Out of these findings emerged a series of policy recommendations that could be used to regulate dimension of quality in the day care setting. Since classroom composition is an area that has implications for costs, for quality, and for whether or not certain children will be served, it is instructive to take a look at this variable from the standpoint of tradeoffs. The policy options suggested by the NDCS (p. 147) are as follows:

Policy A - Group size shall be less than or equal to 14 children and the staff/child ratio shall be at least 1 caregiver for 7 children.

Policy B - Group size shall be less than or equal to 16 children and the staff/child ratio shall be at least 1 caregiver for 8 children.

Policy C - Group size shall be less than or equal to 18 children and the staff/child ratio shall be at least 1 caregiver for 9 children.

Figure 2 summarizes the differential impact of alternative classroom composition policies on caregivers and child behaviors and test scores. On the one hand, Policy A is best from the standpoint of promoting quality care. According to Ruopp et al. (1979), however, Policy A "offers the least potential for reducing cost per child and thereby the least potential for serving more children from existing government day care appropriations. Policy C, on the other hand, is the least effective quality standard but offers the most potential for reductions in cost per child" (p. 148). Quality and cost are thus difficult to separate. Tradeoffs must be made when indicators of quality are introduced in the early childhood setting.

Another area of quantitative research that has implications for defining quality in early childhood education is research on effective schools. The Harvard University Search for Effective Schools Project directed by Ronald Edmonds sought effective schools among those in which these traits prevailed:

- 40 percent or more of the student population was black.
- 50 percent or more of the population was eligible for free lunch (an indication of poverty).

They defined two criteria of effectiveness:

- Students gained one year or more on standardized reading and/or mathematics achievement tests for every year of instruction or participation in a program.

Figure 1

NATIONAL DAY CARE STUDY FINDINGS FOR GROUP SIZE

- In smaller groups as contrasted with larger ones
  - Lead teachers engage in more social interaction with children and less observation of children.
  - Children show more cooperation, verbal initiative, and reflective/ innovative behavior.
  - Children show less hostility and conflict and are less frequently observed to wander aimlessly or to be uninvolved in tasks or activities.
  - Children make greater gains on the Preschool Inventory and Peabody Picture Vocabulary Test.
- In classes with fewer children per caregiver as opposed to those with more children per caregiver
  - Lead teachers devote less time to managing children (commanding and correcting) but more time to center-related activities and to interaction with other adults.
- In classes supervised by lead teachers with child-related education or training
  - Lead teachers spend more time in social interaction with children.
  - Children show more cooperation and greater task persistence and are less frequently uninvolved in tasks or activities.
- In centers where the proportion of caregivers having child-related education or training is higher
  - Children make greater gains on the Preschool Inventory.

Note. From Children at the center: Summary findings and their implications, Final report of the National Day Care Study, Volume 1, (pp. 84-102), by R. Ruopp, J. Travers, F. Glantz, & C. Coelen, 1979, Cambridge, MA: Abt Associates. Copyright 1979 by Abt Associates. Adapted by permission.

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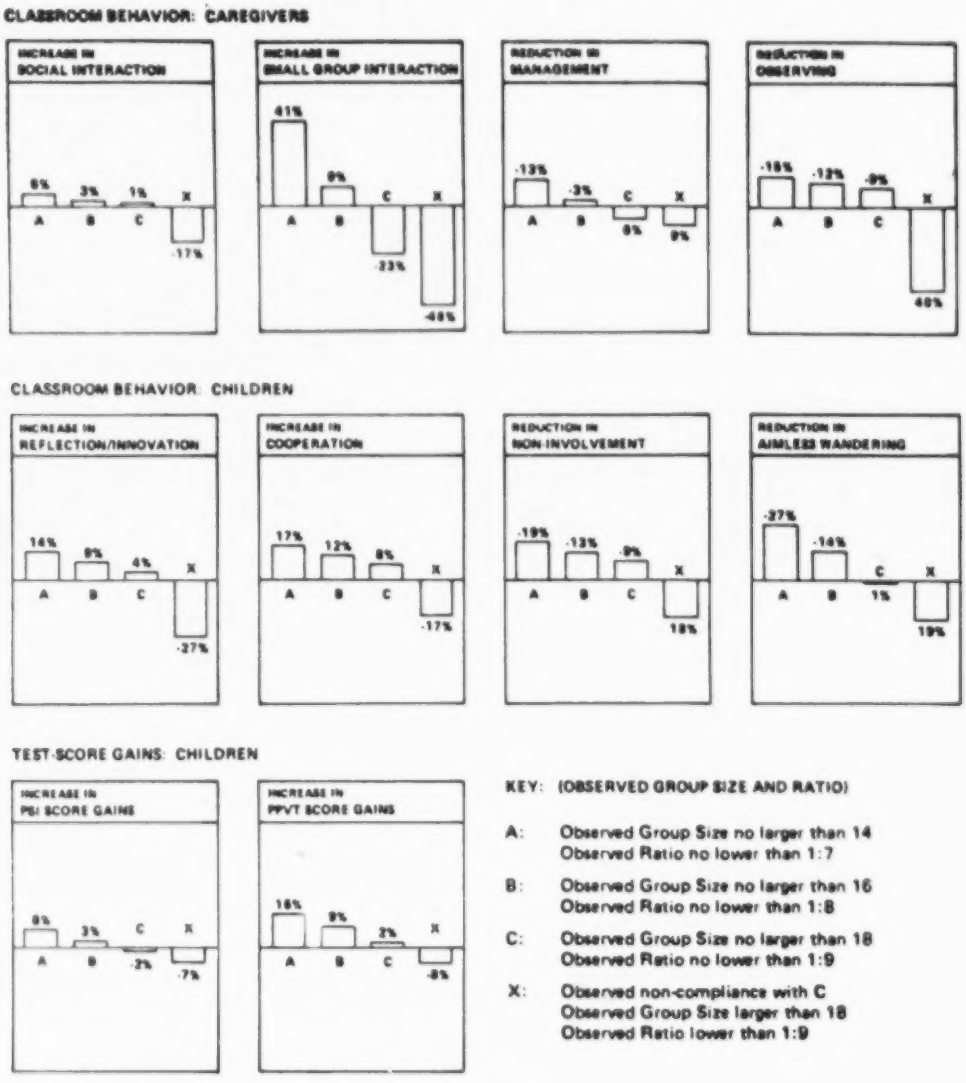
Figure 2

NATIONAL DAY CARE STUDY FINDINGS FOR CLASSROOM COMPOSITION[a]
(PERCENT INCREASE OR REDUCTION FROM NDCS AVERAGE[b])



KEY: (OBSERVED GROUP SIZE AND RATIO)

A: Observed Group Size no larger than 14
Observed Ratio no lower than 1:7

B: Observed Group Size no larger than 16
Observed Ratio no lower than 1:8

C: Observed Group Size no larger than 18
Observed Ratio no lower than 1:9

X: Observed non-compliance with C
Observed Group Size larger than 18
Observed Ratio lower than 1:9

[a] Figure 2 is intended to illustrate the direction of relationships between each policy option and selected measures of quality as well as the consistency of the pattern of results that emerged across different outcome measures. Corrections for imperfect reliability of measures would have resulted in even larger effects than shown here.

[b] Program quality measures were determined with centers in *full compliance*, defined as (1) no centers that violate classroom composition regulatory minimums, (i.e., with groups too large and ratios too low) and, (2) no more than 12 to 15 percent (on average) more caregiving staff per center than the regulatory limit (A, B and C only).

Note. From Children at the center: Summary findings and their implications, Final report of the National Day Care Study, Volume 1, (p. 150), by R. Ruopp, J. Travers, F. Glantz, & C. Coelen, 1979, Cambridge, MA: Abt Associates. Copyright 1979 by Abt Associates. Reprinted by permission.

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- The achievement gains remained stable or increased over the course of two consecutive school years.

While this definition of effectiveness was developed to define quality in an early elementary setting, it can also be slightly modified to define an effective preprimary setting. What factors distinguish effective schools from ineffective schools? Edmonds (1981), in a review of literature on effective schools, identified five critical factors. An effective school, according to Edmonds:

1. Has a principal who takes a strong leadership role
2. Focuses on the development of basic skills in reading and mathematics
3. Evaluates students frequently and systematically
4. Has an orderly school climate
5. Has teachers with high expectations for school success

Few would doubt that the effective Head Start program or day care center would include these components. If school readiness is seen as a major function of the early childhood education program, then the program must have an administrator who takes an active role in creating a climate for learning. The other factors should naturally emerge over time. A focus on developing the basic skills of reading and mathematics does not necessarily mean that preschoolers will be taught in the same way as elementary school children. Reading readiness and math readiness activities can and should be approached in a developmentally appropriate manner. The extent to which these readiness skills (along with the other skills that emerge during the preschool years) are mastered should be of concern to both teachers and administrators, thus leading to both formal and informal evaluation. An effective preschool setting will be orderly to the extent that rules for behavior will have been previously established and consistently enforced. Finally, an effective preschool setting cannot exist without teachers who hold high expectations for the success of their children.

The National Day Care Study and the Search for Effective Schools are examples of the contributions of research to defining quality in early childhood education. In spite of these contributions, however, the traditional approaches are coming under increasing attack. One of the more comprehensive critiques of the traditional research model has been articulated by Bronfenbrenner (1979). According to Bronfenbrenner, the limitations on research in day care and preschool environments are derived from the following characteristics of the traditional model:

1. <u>The empty setting</u>. There is little information obtained about settings themselves or what takes place within them. Molar activities (i.e., ongoing behaviors), interpersonal structures, and congruence of behaviors to roles are seldom mentioned.

2. Ecologically constricted outcome measures. Typically outcomes have been assessed through either psychological tests or laboratory measures. These kinds of measures may reflect how the child views the particular situation rather than assessing his/her general level of functioning.

3. Fixation on the child as the experimental subject. The focus on the child as the traditional unit of analysis ignores the impact of early childhood settings on the family as a whole. (pp. 164-65)

If research is to continue to play a major role in defining quality in early childhood education, future research efforts must extend beyond the limitations imposed by the quantitative paradigm.

One recent effort that addresses some of the limitations in the traditional approach is found in Valerie Suransky's The Erosion of Childhood (1982). In making her case for an ethnographic approach to the study of early childhood settings, Suransky comments on the dominant paradigm in child development research:

> In accepting the false dichotomies of science--of thought from action, emotion from reason, subject from object--we reduce the child to a set of isolated functions capable of being measured and separated from other component parts. This atomization has resulted, for example, in a conception of intelligence as a unitary quantity, a product, not an integrative human action upon reality. (p. 32)

She goes on to state the following:

> The phenomenological task, therefore, lies both in the process of description and critical reflection where the primacy of experience holds sway, and in the attempt to penetrate the essence of a phenomenon, to the core themes that underlie what is being observed. It is the material produced from an intensive participatory field study of situational microcontexts that gives actuality to the macroworld beyond... (p. 36)

Suransky conducted a series of in-depth ethnographic field studies of early childhood settings in a variety of demographic contexts. She raises the kinds of questions that the traditional approach to research has thus far been incapable of generating. The following quotes concerning three of the centers she studies are indicative of the kinds of issues she raises in her investigation:

On Golda Meir Nursery School

> One of the striking characteristics of this center's programs was its rigid adherence to a time schedule to which all activity and play was subordinated...
>
> The concept of allowing a child to complete an activity he was engaged in was subordinate to the compelling nature of the schedule....The strict demarcation of the morning, by its very organization, denied the children the possibility of a continuous uninterrupted activity brought to its own natural closure...(pp. 60-61)

Frequently, a conflict would arise between the developmental needs of a child at play and the schedule and cognitive needs of teachers at work. (p. 72)

On Busy Bee Montessori Center

...children were taught to discriminate "my" work from "others'" work and to make distinctions between possessed-work-while-I-am-engaged-in-it and everyone's-work (open possession/free work when not in use...)

Given the Piagetian insights pertaining to the egocentrism of the preoperational state of development and the fact that this is the period in which the child begins to decenter and move from extreme egocentrism to a more mature accommodation of the external world, it appeared that the staff were unconsciously fostering regressive egocentrism by insisting on the insularity, possession, and ownership of work. (pp. 83-84)

On Lollipop Learning Center, Inc.

Many characteristics of Lollipop Learning Center were influenced by its underlying profit orientation and corporate structure... (p. 108)

A great number of the children, particularly the two-and-a-half- to four-year-olds, tended to cling to the teachers and aides. Many cried for their parents during the day. However, despite the evident need for significant attachment, the children were not able to form any long-term relationships with adults....In one and a half years I observed six changes of staff in the day care and five in the nursery school. (p. 110)

It is obvious from these reports that Suransky is concerned with much more than staff-child ratios and performance on psychological tests. The questions she raises about quality in early childhood settings go right to the core of our perceptions of the role these settings should play in our society. For example, Suransky states, "The demand for free and universally available day care from birth onward is a women's issue rather than a child issue, and we need to acknowledge that honestly" (p. 47).

She thus brings to the surface the issue of whether day care is "good" for young children. While there is considerable quantitative research that suggests that "quality" day care settings do not have negative effects on children, (e.g., Clarke-Stewart, 1982), it must be recognized that these studies also suffer from, in Bronfenbrenner's words, "ecologically constricted outcome measures." A considerably different view of day care effects emerges from Suransky's approach. This is not to say that her observations and conclusions can be generalized beyond the settings she investigated. They are, after all, case studies and thus plagued by the limits of the generalizability of any single-case approach. Her work does suggest, however, that definitions of quality need to have both quantitative and qualitative dimensions.

Defining Quality: Research from Culture-Specific Perspectives

The emergence of research models and paradigms not embedded in the limited perspective of quantitative research is also leading to the articulation of definitions of quality that are unique to particular cultural groups. Within the African-American community, the development of the National Black Child Development Institute (NBCDI) Model Program Description Project (Coleman, 1977) represented an attempt to identify elements of from within the African-American community. This project involved interviews and observations in a number of independent (i.e., not dependent on government funds) early childhood settings in African-American communities. Subsequent to the data collection, a set of principles was identified that attempted to define what a high quality environment encompasses for the young African-American child. These principles may be found in Figure 3.

The focus on such elements of quality as building ethnic identity and promoting cultural values can also be seen in the development of the African Culture Content and Role Analysis (ACCRA) scale (Rashid, 1983). ACCRA is a scale designed to assess the extent to which the cultural needs of African-American children are addressed in the early childhood setting (see Figure 4). While neither the NBCDI Project nor ACCRA were designed to empirically investigate the linkages between elements of quality and specific child-outcomes, they clearly suggest that our definition of quality must address the issue of cultural relevance. It can no longer be assumed that what is good for the middle-income European-American child is necessarily good (to the exclusion of everything else) for the low-income African-American or Hispanic-American child. While quality obviously involves more than addressing cultural needs, it must also be recognized that programs that do not address the cultural as well as the academic needs of the children they serve cannot be considered high quality programs.

Defining Quality: A Perspective on Future Research

Any discussion of the future of research that addresses the issue of quality in early childhood education must, first of all, rise above the quantitative versus qualitative debate that has been so salient for the past two decades. It must be recognized that each approach has its strengths and weaknesses and that the research ultimately having the greatest impact on the field will probably incorporate elements of both paradigms in its design. Discussing quality with reference to studies that represent the paradigmatic stances of both the National Day Care Study and Suransky's The Erosion of Childhood is clearly a broader approach than focusing on one or the other.

Figure 3

PRINCIPLES FOR A BLACK CHILD DEVELOPMENT CENTER

1. The direction and motivation must be sharply focused upon and guided by a recognition of the cultural heritage, history, and values related to the [struggle of black people] both in America and abroad.

2. The program must be effective in fostering racial identity, teaching the child to actualize positive perceptions of self and race. This must be reflected in the teacher's expectations of the child's potential to achieve and must be manifested in the total program.

3. It must be independent regardless of the funding source. This suggests that the program must be based in and controlled by the black community and it must take full responsibility for the design and implementation of the program's organizational structure, teaching strategy, theoretical basis, and curriculum content.

4. It must serve as a political vehicle initiating the acquisition of those values and attitudes that foster the commitment to devote oneself to the survival and maximum development of black people.

5. As primary role models, teachers, parents, and community residents involved in a black preschool program must be prepared to redefine, exhibit, and transmit a value system and behavioral patterns consistent with the ideology and objectives of the program.

6. The children must be provided with a learning environment that promotes collective and individual responsibility and discipline, as well as exploration and experimentation designed to develop an analytical approach to problem solving.

7. The interaction pattern between teachers, parents, and community members must reflect a shared and cooperative responsibility to insure the immediate positive and appropriate reinforcement of the child's cognitive, social, emotional, and physical development.

8. The curriculum content and teaching strategy of the program must be designed in accordance with and in full consideration of the child's social and physical environment, in order to maximize his conceptualization and validation of the knowledge presented.

9. The program must provide mechanisms for maintaining the black family as the child's primary socializing agent.

10. The program must provide activities that insure the child's physical development and the acquisition of the value of proper nutrition and exercise.

Note. Adapted from Black children just keep on growing: Alternative Curriculum models for young black children by M. Coleman (Ed.), 1977, Washington, DC: National Black Child Development Institute.

Figure 4

AFRICAN CULTURE CONTENT AND ROLE ANALYSIS (ACCRA)

Ecological Variables — Score

1. Classroom Walls - Are there pictures of African and/or African-American children/adults on the walls?
   no (0) one or two (5) a great deal (10) ____

2. Bulletin Board - Are items on bulletin board clearly indicative of the child's African-American heritage?
   no (0) somewhat (2) clearly (5) ____

3. Director's Office - Does the decor of the director's office reflect his/her involvement with the African-American community?
   no (0) somewhat (2) clearly (5) ____

4. Library Area - Are there books in the library area about African and/or African-American children and families?
   no (0) a few (5) a large proportion (10) ____

5. Housekeeping and/or Doll Area - Are there dolls and puppets that are clearly African and/or African-American?
   no (0) a few (5) a large proportion (10) ____

Curriculum Content

1. Are the children regularly read stories about Africa/Africans/African-Americans?
   no (0) occasionally (5) quite often (10) ____

2. Is there celebration of African/African-American holidays?
   no (0) occasionally (2) regularly (5) ____

3. Are the children taught an African language or phrases?
   no (0) occasionally (5) regularly (10) ____

4. Do the children's aesthetic experiences (art, music, dance, drama) reflect the African/African-American experience?
   no (0) occasionally (10) regularly (20) ____

Staff/Child/Parent Interaction

1. Is the classroom or center presented as an extended family?
   no (0) somewhat (2) clearly (5) ____

2. Is there open discussion of the needs, problems, accomplishments, of African-Americans?
   no (0) occasionally (2) quite often (5) ____

3. Are the methods used to discipline children gentle but firm?
   no (0) occasionally (2) regularly (5) ____

4. Is there cooperative involvement of parents in program planning?
   no (0) occasionally (2) regularly (5) ____

A second issue that must be confronted both by the research practitioner and by policy-making communities is the insider/outsider dichotomy. Who is best qualified to conduct research on early childhood settings in specific communities? Is simply having a track record as an educational researcher enough? Or should the communities in which the settings are located develop some criteria for researcher sensitivity? Can white middle-class researchers or, for that matter, any researcher armed solely with white middle-class models and paradigms accurately define, describe, or quantify quality in an early childhood setting in a San Antonio barrio, a Chicago project, or a rural Mississippi farming community?

The task of defining quality in early childhood education will profit most from the research of those well schooled in the various ecological approaches to the study of human development. During the late 1960s and early 1970s black social scientists were adamant in their castigation of mainstream theorists for their "victim blame," individual pathology models of behavior and development. Their feeling was that the "system" was to blame and therefore had to be studied. By the end of the 1970s, the study of ecological, systemic influences on human development emerged as the chosen paradigm of a number of theorists (e.g., Bronfenbrenner, 1979). It is too early to tell exactly how this ecological paradigm will influence approaches to defining quality in early childhood education. Future perspectives on quality, however, will have to be considerably broader than those of the past. It is past time to abandon unidimensional, myopic, and ecologically constrained definitions of quality in early childhood settings. It is up to the community of early childhood professionals to recognize that a new day has dawned and to act accordingly.

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